

FINDING A VOICE:
PLACE AND QUEER STUDENT HEALTH AT THE UNIVERSITY OF
SASKATCHEWAN

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ABSTRACT

FINDING A VOICE: PLACE AND QUEER STUDENT HEALTH AT THE UNIVERSITY OF SASKATCHEWAN

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Within recent years, there has been a growth of interest in both queer health and geographies of sexualities. However, the majority of this research has focused on both queer health and use of space as they related to sexual activity, sex-related health risks, and desire, while overlooking those aspects of both queer identity and health that are not directly tied to sexual activity. This study addresses these gaps within the literature by studying queer health using the lens of place. The objective of this study is to understand how self-identified queer students at the University of Saskatchewan negotiated space and in particular, safe spaces, in their daily lives, and how this negotiation affected their health and well-being. This research was conceptually guided by ideas within feminist thought and queer theory. The study took place in Saskatoon, Saskatchewan and included a group of five University of Saskatchewan undergraduate and certificate students who self-identified as queer. Participants were recruited through advertisements posted both online and throughout the campus. Data were collected through an action research approach with methods that included individual interviews, group meetings, and Photovoice. Results of the study include a list of elements that participants used to label safe spaces and lists of common safe spaces and safe areas on the University of Saskatchewan campus and throughout Saskatoon. Participants in this study emphasized the relationship between the people who made regular use of a space, its overall "feel," and their

familiarity with the space with its level of safety, while also making it clear that queer was not always synonymous with safe. These findings yield insight into the process that individuals use to mentally label space and the subsequent ways in which this labelling influences use of space and, on a broader level, reflects individual and group identity. This raises some important questions about current definitions and ideas regarding safe spaces and provides a foundation for future research.

TABLE OF CONTENTS

ACKNOWLEDGEMENTS	i
ABSTRACT.....	ii
LIST OF ABBREVIATIONS.....	vii
LIST OF TERMS.....	viii
LIST OF FIGURES	xii
1.0 INTRODUCTION	1
1.1 Research Goal and Objectives.....	4
Objective 1: Challenge the sexual activity-centric view of queer self-identity.....	5
Objective 2: Understand how place, in general, influences the health of self-identified queer students	6
Objective 3: Understand how self-identified queer students determine whether spaces are “safe” and “unsafe”	7
1.2 Thesis Outline and Structure	8
2.0 BACKGROUND & LITERATURE REVIEW	11
2.1 Multiple Meanings: What Exactly is “Queer”?.....	12
2.2 The Roots of Queer Health Research	17
2.2.1 Defining the Population	19
2.2.2 Research Difficulties: Terminology, Inclusion and Self-Identity.....	23
2.3 Queer Health Issues.....	25
2.4 Place, “Safe Spaces” and Queer Health	30
2.4.1 Medical Geography and Geographies of Sexualities.....	32
2.4.2 Education and the Concept of “Safe Space”	35
2.5 Bridging the Gaps.....	41
3.0 METHODOLOGY & RATIONALE	44
3.1 Personal Context	45
3.2 Being Queer at the U of S	48
3.3 Action Research	54
3.4 Photovoice.....	56
4.0 DATA COLLECTION	58

4.1	Participants	59
4.2	Recruitment	63
4.3	Orientation Session	65
4.4	Photovoice	68
4.5	Individual Interviews.....	70
4.6	Data Analysis and Final Stages	73
4.6.1	Photo Analysis	73
4.6.2	Interview Transcription & Analysis.....	75
4.7	Study Context.....	76
5.0	RESULTS & DISCUSSION.....	82
5.1	Identifying and Negotiating Safe Spaces	84
5.1.1	People as Safe Spaces	88
5.1.2	Safe Spaces and Familiarity.....	93
5.1.3	The “Feel” of a Safe Space	96
5.1.4	Queer is not Synonymous with Safe.....	99
5.1.5	Conditional Safe Spaces	103
5.2	Safe Spaces in Saskatoon	108
5.2.1	Common Safe Spaces in Saskatoon.....	109
	302 and Diva’s.....	111
	Saskatoon Farmer’s Market.....	115
5.2.2	Safe Areas	118
	University of Saskatchewan Campus	119
	Broadway.....	124
5.2.3	Safe Spaces According to Use	127
	Home Life.....	129
	Places of Work.....	133
	Nightlife and Entertainment	137
	Meeting Places: Restaurants, Coffee Shops & Bookstores	141
5.3	Identity: The Sum of Many Parts	144
5.3.1	Different Degrees of Identity	146
5.3.2	Identity, Safe Space and Exclusion.....	150

5.3.3	Safe Spaces, Sexual Activity and Desire	154
5.4	Queer Identity and Use of Space.....	156
5.4.1	Unintentional Safe Spaces	158
5.4.2	Queering the Community.....	160
5.4.3	Questioning the Assumption of Default Heterosexuality	163
5.5	Safe Spaces and Health	165
5.5.1	Space and Emotional Well-Being.....	166
5.5.2	Sense of Belonging, Community, and Social and Mental Health.....	168
6.0	Conclusion	172
6.1	Study Limitations	174
6.2	Future Research.....	177
REFERENCES		179
APPENDIX A: INDIVIDUAL GENERAL CONSENT FORM.....		187
APPENDIX B: ORIENTATION MEETING & FOCUS GROUP, INDIVIDUAL INTERVIEW & CONCLUDING DISCUSSION CONSENT FORM.....		192
APPENDIX C: CONSENT AND INFORMATION FORM—PHOTOVOICE PARTICIPATION		198
APPENDIX D: PHOTOVOICE THIRD PARTY PHOTOGRAPHS RELEASE		202
APPENDIX E: PHOTOVOICE GUIDELINES		205
APPENDIX F: PARTICIPANT PHOTOGRAPHS RELEASE.....		208
APPENDIX G: INTERVIEW TRANSCRIPT RELEASE.....		210
APPENDIX H: INDIVIDUAL INTERVIEW SCHEDULE		211
APPENDIX I: ON AND OFF CAMPUS RESOURCES		213
APPENDIX J: RECRUITMENT FLYER		215

LIST OF ABBREVIATIONS

Abbreviation	Definition
AIDS	Acquired Immune Deficiency Syndrome
GLMA	Gay and Lesbian Medical Association
HIV	Human Immunodeficiency Virus
LGBT	Lesbian, Gay, Bisexual, and Transgender
LGBTQ	Lesbian, Gay, Bisexual, Transgender, and Queer
STI/STD	Sexually Transmitted Infection/Sexually Transmitted Disease
USSU	University of Saskatchewan Students' Union
WHO	World Health Organization

LIST OF TERMS

Ally: An individual who advocates and works to protect the rights of a marginalized group of which they are not a part. In this context, specifically, an ally will refer to a non-queer person who is supportive of LGBTQ rights.

Alma-Ata Declaration (The Declaration of Alma-Ata): A document released by the World Health Organization in 1978, following the International Conference on Primary Health Care that took place in Almaty, Kazakhstan. The declaration was the first document emphasizing the importance of primary care on an international level and also framed health as a socio-economic and human rights issue (WHO, 1978).

Asexual: A person who does not experience sexual attraction (The Asexual Visibility and Education Network [AVEN], 2008).

Bisexual: An individual who experiences two types of attraction. These types of attraction may involve attraction to two separate genders or attraction to individuals of the same gender as oneself and attraction to individuals of any gender not the same as oneself.

Christine Jorgensen: An American transwoman and one of the first people to have widely publicized sex-reassignment surgery in the 1950s (Schlager, 1998).

Cisgender/CIS-gender: An individual whose gender identity aligns with the physical sex they were assigned at birth. The term is taken from the Latin prefix, which is used in chemistry and denotes an isomer that has a pair of identical atoms and is considered the opposite of the prefix trans-.

Gay Ghetto: Neighbourhoods in many large cities that were common throughout the 1970s and 80s and housed a primarily gay male population (Bell, 1991).

Genderqueer: One of several third-gender categories used to denote an individual whose gender identity does not fit within the binary categories of male and female. This particular term is used primarily within Western culture.

Harvey Milk: The first openly gay man elected to public office within the state of California (Schlager, 1998).

Heteronormativity: The assumption within society that heterosexuality and "traditional" gender roles and family structure are normal and expected, and that anything that deviates from these roles is therefore abnormal and is otherwise seen in a negative light.

Ottawa Charter (The Ottawa Charter for Health Promotion): A charter released by the World Health Organization following the first International Conference on Health Promotion in Ottawa, ON in 1986. The ultimate goal of the charter was to further the aims of the Alma-Ata Declaration and to advocate for health for all by the year 2000 (WHO, 1986).

Out: The term used for a queer individual who has "come out of the closet" and is open about their sexuality or gender identity.

Pansexual: Individuals who experience sexual attraction for others of all genders.

Positive Space Program: A university-wide initiative at the University of Saskatchewan to reduce the impact of homophobia and heterosexism on campus. This program is the U of S-specific version of a safe spaces program.

Queer: A term used to denote individuals with a sexual orientation or gender identity that falls outside of heteronormative expectations. Can be used as an umbrella term for LGBTQ individuals, but has a host of political and societal connotations. It should also be noted that not all LGBTQ individuals readily identify with this term.

Rio Political Declaration (on Social Determinants of Health): A declaration released by the World Health Organization and adopted during the World Conference on Social Determinants of Health in October 2011. This declaration calls for global commitment at the political level of a social determinants approach to health (WHO, 2011).

Safe space: Term used to denote spaces that are intended to be free from prejudice and within which queer individuals are encouraged to express themselves freely. The concept is used most often in an educational context, although it has expanded to include work places, broader community spaces, and even the Internet.

Social Determinants of Health: The conditions in which individuals are born, grow, live, work and age. These conditions are influenced by a variety of political, social, and economic factors and have a direct impact on health (WHO, 2012).

Stonewall Riots: A series of demonstrations that took place in New York City in response to a police raid on the Stonewall Inn. These demonstrations drew attention to police discrimination against LGBT people and ultimately led to the formation of groups that advocated for LGBT recognition and rights (Schlager, 1998).

Transgender: An individual whose gender identity does not align with the physical sex they were assigned at birth. Transgender individuals can be male, female, or of a non-binary gender.

Transsexual/Transexual: Term used to refer to a transgender individual who has chosen to go through sexual reassignment surgery. This term is slightly antiquated and not used as frequently in current terminology.

Two-Spirited: Term used to denote several third- or cross-gender categories of identity found within Native American, First Nations, and Inuit cultures.

Well-being: A good or satisfactory condition of existence. This term is often used in lieu of "good health" to reflect the recent, more holistic view of health.

LIST OF FIGURES

Figure	Page
Figure 4.1 Saskatoon Boundary Map: Selected Safe Spaces.....	76
Figure 5.1. McNally Robinson Bookstore by Danny.....	88
Figure 5.2. Student Meeting Space by Isaac.....	95
Figure 5.3. Diva's Nightclub Alley & Entrance by Danny.....	103
Figure 5.4. 302 Entrance by Scott.....	111
Figure 5.5. Diva's Sign by Derek.....	113
Figure 5.6. 302 Entrance by Derek.....	114
Figure 5.7. Heirloom Tomatoes by Lydia.....	115
Figure 5.8. Farmer's Market Pavilion by Danny.....	115
Figure 5.9. Farmer's Market Sign by Derek.....	116
Figure 5.10. The University of Saskatchewan Bowl by Lydia.....	119
Figure 5.11. KW Nasser Centre by Derek.....	119
Figure 5.12. John Mitchell Building Sign by Scott.....	120
Figure 5.13. Student Health Centre by Danny.....	121
Figure 5.14. Student Club Door by Isaac.....	122
Figure 5.15. Broadway District by Danny.....	124
Figure 5.16. Bronze Buskers by Lydia.....	124
Figure 5.17. The Refinery by Scott.....	125
Figure 5.18. Broadway & 10 th by Derek.....	126
Figure 5.19. Living Room by Derek.....	129
Figure 5.20. Living Room Keyboard by Scott.....	130
Figure 5.21. The Den by Lydia.....	130

Figure 5.22. Dining Room & Kitchen by Isaac.....	131
Figure 5.23. Work Door by Derek.....	133
Figure 5.24. Broadway Bars by Lydia.....	135
Figure 5.25. The Galaxy Cinema by Scott.....	137
Figure 5.26. The Yard & Flagon by Danny.....	138
Figure 5.27. Browser's by Danny.....	141
Figure 5.28. USSU Student Union Building by Isaac.....	142
Figure 5.29. 2nd Street Starbucks by Derek.....	143

1.0 INTRODUCTION

The discussion of health and what is or is not “healthy” has become almost impossible to escape in recent years, both in the research world and throughout society at large. “Health” is something for which individuals strive, that the health care industry seeks to achieve, that policy makers advocate, and that politicians often promise to improve. Discussions of health can be seen on television, are found in magazines and newspapers, have entire websites devoted to them on the Internet, and are often a part of daily conversations. Health has become a goal and, at times, an obsession for much of Western culture, with numerous researchers, organizations, branches of government, and industries devoted solely to its study, maintenance, and promotion. Still, the question remains: what exactly is “health” and what does it mean to be “healthy”? These are important questions that have warranted a great deal of discussion and attention. This attention has only increased over the course of the last several decades as public and professional interest in health have grown.

In the early days of public and community health, there was an emphasis placed on physical health and infectious and chronic disease, driven by the belief that to be “healthy” meant to be free from disease, illness, and physical impairment (Center for Disease Control [CDC], 1999; Public Health Agency of Canada, 2008; Rosen, 1958;). While this interest in physical health and infectious disease was an important first step, and it continues to play an important part in medical and health research, researchers have since recognized that there is much more to health than the simple absence of disease. Rather, it is “a dynamic process involving the harmony of physical, mental, emotional, social and spiritual well-being. Health

enables individuals, families and communities to function to the best of their abilities within their environment” (Saskatchewan Provincial Health Council, 1999, p. 4).

Over the course of the past several decades, progress has been made in extending this new view of health into research, prevention, policy, and clinical practice. This began as early as the 1940s, with the World Health Organization’s (1948) adoption of a new, more comprehensive definition of health as “a state of complete physical, mental and social well-being” (p. 1), an idea that was then further expanded and popularized by documents such as the Alma Ata Declaration (World Health Organization [WHO], 1978), the Ottawa Charter (WHO, 1986), and the recent Rio Political Declaration on Social Determinants of Health (WHO, 2011). These documents, along with the conferences, research, and discussion that took place between their respective publications, helped to encourage a more holistic approach to health that included consideration of the underlying social causes of good and ill health (WHO, 1986). However, despite the new outlook on health and the improvements that have been made, there is still a long journey ahead on the road to improvement, particularly where the health of marginalized groups is concerned.

This new, broader view of health has led many health practitioners and researchers to begin recognizing certain disparities that exist within society and put some groups at increased risk for poor health. Specifically, this applies to those groups that are marginalized due to factors such as ethnicity, culture, class, age, ability, sexuality, gender identity, socioeconomic status, and educational level (Department of Health and Human Services, 2000). Health, therefore, is not solely the result of exposure and susceptibility to pathogens or injury-causing accidents. It is, instead, the result of a complex mixture of biological, social, cultural, economic, environmental, and even political factors, known as social determinants of health, that affect the individual and their overall well-being (Department of Health and Human Services, 2000; Public Health

Agency of Canada, 2008; WHO, 1986). For groups within a society that are already marginalized, the impact that these determinants have on their health can be, more often than not, negative. However, because these groups are marginalized, their voices and concerns, health-related and otherwise, are often overlooked or ignored in favour of the dominant voices of those deemed by society to be the "majority" (Department of Health and Human Services, 2000; WHO, 1986). Although many researchers and activists have recognized and sought to remedy this in recent years and research into the health of marginalized populations has become much more prevalent than it was three decades ago, the health care industry and society at large have been slow to change, and there remains much work to be done.

Even among marginalized populations, particular groups have been the focus of a majority of research, leaving other populations relatively understudied. This is not to say that the research being done and the groups that have garnered this attention are not important, but simply that the attention paid to all marginalized groups, and especially those that have been understudied to date, should be increased as a whole. The queer community is one such understudied population, in spite of the existing research having shown that queer individuals are often at higher risk for poor health (Boehmer, 2002; Gay and Lesbian Medical Association [GLMA], 2001; Grossman & D'Augelli, 2006; Harcourt, 2006; Meyer, 2001). There are a variety of reasons for this lack of research, including the relative newness of queer health as an area of study, cultural and academic prejudice, difficulty "targeting" the queer community, the inherent heteronormativity within many cultures (and Western cultures in particular), and even disagreement about what exactly constitutes "queer" (GLMA, 2001; Meyer, 2001). The research that does exist often focuses on the physical aspects of queer health and tends to overlook the broader definition of health, particularly where it pertains to the role of social,

environmental, and spiritual factors. Additionally, much of the research tends to focus on particular portions of the queer community, such as adults, while overlooking children, youth, and young adults.

1.1 Research Goal and Objectives

As a member of the queer community, I have a personal interest in further exploring queer health and attempting to fill in some of the gaps within the literature. The more that is known about queer health, the more both queer individuals and health care providers will be able to strive to improve the health of the queer community as a whole. This includes those portions of the community that have been underrepresented within the current body of research. This thesis adds to the body of knowledge regarding queer health, identity, and use of space, and also improves upon my personal knowledge of queer health and the knowledge of study participants and the university community as a whole.

I address the gaps found within the literature through the use of a Photovoice project utilizing an action research methodology. In particular, I focus on queer student health in an effort to give voice to some of the less-often-studied portions of the queer community, namely youth and young adults. Participants in this study were recruited from the University of Saskatchewan and the subsequent research took place throughout the university campus and the city of Saskatoon. The main objective of this project was to understand how self-identified queer students at the University of Saskatchewan negotiated space and in particular, safe spaces, in their daily lives, and how this negotiation affected their health and well-being. This objective was addressed through the use of the following three research objectives and related research questions:

Objective 1: Challenge the sexual activity-centric view of queer self-identity

The first objective of this research project is to challenge the sexual activity-centric view of queer self-identity. There is a tendency within queer health research, as will be demonstrated in the background and literature review portion of this thesis, to equate behaviour with identity. While the two are related concepts, it is important to note that sexual activity and behaviour are not the only, or often even the deciding, factors in terms of queer identity. Through the course of this research, I call into question the assumption that sexual activity and behaviour are equivalent to queer identity, while also examining queer health from a broader standpoint that considers all aspects of health: sexual, physical, social, spiritual, and cultural. This objective seeks to achieve this, and will be further expanded upon by focusing on the ways in which students at the University of Saskatchewan define queer identities, both in general and in terms of their own identities. This will be done through use of the following two research questions:

Question 1: How do young people within the queer community on the U of S campus define a healthy queer identity?

Question 2: How do young people within the queer community on the U of S campus define their identities?

These questions were incorporated into both the data collection and analysis portions of the research. They were used to guide the Photovoice method, to develop questions for the individual interviews, and were further utilized during data analysis. Further discussion of these questions takes place within the data analysis section of this thesis.

Objective 2: Understand how place, in general, influences the health of self-identified queer students

The second research objective for this project is to understand how place influences the health of self-identified queer students. Environment has long been considered one of the primary social determinants of health, and recent work aimed at creating health equity has placed emphasis on building “healthy” places in the hopes that people might flourish within them (Commission on Social Determinants of Health [CSDH], 2008). Research in the fields of medical geography, geography of sexuality, and education has further shown that place can have a direct impact on health (Binnie, 2007; Blum, 1974; Stokols, 1996; McElroy, Bibeau, Steckler, & Glanz, 1988). This impact, however, is not only on physical health. Research within the field of education into safe spaces has shown that the presence of safe spaces can have a positive impact on student performance and overall well-being (Crowley, Harre, & Lunt, 2007; Holley & Steiners, 2005). Because of this relationship, I have chosen to focus specifically on the influence of place on the health of self-identified queer students at the University of Saskatchewan. These ideas regarding place and its influence on health have been used to build the theoretical basis for this study and have also been incorporated into the Photovoice and participant interview portions of this research. I also expand this objective to include ideas surrounding “safe” and “unsafe” spaces and their influence on the health and well-being of participants. This is done through the use of the following research questions, which are discussed in greater detail in later portions of this thesis:

Question 1: How does the presence of "safe" space (or safe spaces) contribute to the overall well-being of queer young people?

- *Sub-question 1:* What is this contribution?

- *Sub-question 2:* How does this contribution influence uses and representations of space?

Question 2: What influence do potentially “unsafe” spaces have on the health of queer students?

- *Sub-question 1:* What is this influence?
- *Sub-question 2:* How does this influence play out in everyday lives and actions?

Objective 3: Understand how self-identified queer students determine whether spaces are “safe” and “unsafe”

The third and final objective of this study is to understand how self-identified queer students at the University of Saskatchewan determine whether spaces are “safe” or “unsafe.” Much of the previous research into queer health and use of space has centered around spaces that are labelled as “queer” and often focuses on the erotic context of those spaces. While there has been research into safe spaces, most of this research, as will be outlined in the background and literature review portion of this thesis, has been done by education researchers and has focused on safe spaces programs. As such, the focus of much of this research has been spaces that are already labelled as “safe” through use of signage and other indicators used in safe space programs. How queer students might consciously or subconsciously label spaces that are not part of these programs as “safe” or “unsafe” has received little attention. I have incorporated these ideas into the framework of this thesis and also structured much of the Photovoice and individuals interview portions of this research around this objective and these ideas. This objective is explored through the following research questions, which focus on identifying

spaces, determining what criteria are used by participants to mark these spaces as “safe” or “unsafe,” and exploring how participants define and negotiate these spaces:

Question 1: What are these potential “safe” and “unsafe” spaces on the University of Saskatchewan campus and within the surrounding city?

- Do students have common criteria for labelling spaces as safe or unsafe?
- Are there certain ways that students negotiate both safe and unsafe spaces?

Question 2: What makes these spaces “safe” or “unsafe”?

- When and how are these spaces labelled as "safe" or "unsafe" (e.g. after becoming acclimated to campus, after an incident, after speaking with friends or other queer students on campus)?
- Are the methods used to label these spaces individual or are there any common, shared criteria between individuals?

Question 3: How do self-identified queer students define and negotiate “safe” and “unsafe” spaces on the U of S campus?

1.2 Thesis Outline and Structure

The research goals and questions are addressed throughout the course of this thesis, which contains an account of the background, methodology, data, and findings of this research project. The structure of this thesis is broken down into the following five sections: background and literature review, methodology and rationale, data collection, results and discussion, and the conclusion. The following is a brief summary of each section:

Background and Literature Review

This section details the literature related to queer health, place, and safe spaces that was used as a theoretical basis for this research. The discussion includes five sections, including a

review of the origins and meaning of the word queer and the reasoning behind the use of it for this project; a basic overview of the beginnings of queer health research; a discussion of some of the most prominent health issues faced by queer populations; a discussion of the relationship between place, safe spaces, and queer health, including relevant background from the fields of geography and education; and a summary of the gaps in the literature and a brief overview of how this research addresses them.

Methodology and Rationale

This section provides an overview of the methods used in this research and the rationale behind them. The sections within include: a discussion of my personal context, including my reasons for wanting to do this research; an overview of what it means to be queer at the U of S; and two sections devoted to each of the main research methods used for this project, action research and Photovoice.

Data Collection

This section details the data collection portion of the project, including information about study participants, recruitment, the orientation sessions, the Photovoice, and individual interviews, as well as data analysis and the final stages of the project.

Results and Discussion

This section combines a presentation and discussion of the study's results. This discussion is divided into five sections, including a discussion of some of the common elements of safe spaces photographed and discussed by participants; a list of shared safe spaces and safe areas within Saskatoon; a discussion of the relationship between individual identity and space; a discussion of the ways in which participants used and discussed safe spaces, and how this relates specifically to queer identity; and an overview of the potential influence that safe spaces included

in this study could have on participants' health and well-being. The findings within these sections are tied back to the research objectives and questions.

Conclusion

This final section contains reflection about this project and the ways that it served as a learning experience, both personal and academic. It also outlines possible limitations to this study and directions for future research, as well as providing a brief overview of this project's key concepts and findings.

2.0 BACKGROUND & LITERATURE REVIEW

The background and theoretical framework for this research were drawn from a variety of academic disciplines and research areas, including medical anthropology, medical & health geography, geographies of sexualities, queer theory, feminist theory, educational research, and public and community health. Due to the interdisciplinary nature of this research, an extensive literature review of these fields and the relevant literature pertaining to queer health, use of space, and safe spaces was performed before, during, and after data collection and was used to structure the study, to help guide data collection, and to assist in data analysis.

The following section provides the relevant background information from the literature review and is broken down into four key thematic areas: the origins of queer theory and various meanings of the term “queer”; an overview of queer health research, both in the past and the present; a summary of the known health issues faced by queer populations; and a brief look at the relationship between place, space, and queer health as found in the fields of geography (specifically medical and health geography and geographies of sexualities) and education. The section concludes with a discussion of the notable gaps in the literature and the ways that this research addresses some of these gaps.

2.1 Multiple Meanings: What Exactly is “Queer”?

In order to understand the importance of queer health and the need for research in this area, one must first understand the meaning and origin of the word “queer.” Once used as a slur against lesbians, gays, bisexuals, and transgender (LGBT) individuals, queer has since been appropriated by the LGBT community and is now used by portions of the community, by queer activists, and within academia. In its newly appropriated form, queer often “function[s] as a synonym for ‘lesbian and gay’ or as shorthand for members of the lesbian, gay, bisexual and transgender (LGBT) community” (Giffney, 2009, p. 2). However, while it can be used as a synonym for LGBT or as an umbrella term for those individuals whose sexual orientation, gender identity or expression, and even desires do not fit within heterosexual societal norms, to view it as only this is oversimplifying. More than just a marker of sexual or gender identity, queer is also a challenge to current cultural ideas about sexuality and gender. As Giffney (2009) noted, “it signifies the messiness of identity, the fact that desire...cannot be placed into discrete identity categories....Queer thus denotes a resistance to identity categories or easy categorization” (p. 2). It is exactly this “messiness” and resistance to and critique of socially-constructed ideas about identity and desire that drives much of queer research, research that is rooted in the history of queer activism and studies of sexuality, gender, feminism, and LGBT issues.

While academic interest in same-sex desire and other forms of sexuality deemed “deviant” by the largely heteronormative standards of Western society has always existed, interest in lesbian and gay individuals and their lived experiences that did not seek solely to catalogue, pathologize, or even cure their “deviancy” did not really start to emerge in academic settings until the mid-20th century (Meyer, 2001; Schlager, 1998). This growing interest in lesbian and gay (and, to a lesser degree, bisexual and transgender) issues, especially among the social

sciences and humanities, can be attributed in part to shifting societal views. The push for civil rights and equality that much of the Western world saw in the 1960s and 70s and the growth of feminism led to a period of so-called sexual liberation and a growing interest in and, to varying degrees, public acknowledgement (and sometimes, even acceptance) of the existence of non-heteronormative lifestyles and identities (Schlager, 1998). Events such as the Stonewall Riots¹ in New York City, the publicity surrounding Christine Jorgensen's² sex-reassignment surgery, and Harvey Milk's campaign and subsequent election to public office³ served as visible public reminders of the existence of the queer community (Schlager, 1998). These reminders, along with the growth of "gay ghettos," or neighbourhoods in many large cities that housed a primarily gay male population and were home to gay-owned or -oriented businesses, provided a public face to the LGBT and, more specifically, the gay male community (Bell, 1991; Binnie & Bell, 1999; Brown, Browne, & Lim, 2007). While the LGBT community was still far from mainstream acceptance, it was slowly becoming more acknowledged within society as a whole. Although this increased recognition was not always positive, the visibility of the LGBT community only continued to grow over the next few decades, and research attention given to the LGBT community and the lives of queer individuals grew along with it.

¹ The Stonewall Riots were a series of demonstrations that took place in Greenwich Village, New York, beginning on June 28, 1969. These demonstrations were in protest of a police raid that took place at the Stonewall Inn, an inn that was known for catering to LGBT clientele. The riots ultimately led to citizens of the LGBT community in New York banding together to form activist groups to lobby for LGBT rights, including the rights of openly lesbian, gay, and transgender individuals to gather in establishments without fear of police retribution. The riots were one of the largest demonstrations of their type at that time, and drew further public attention to the Gay Liberation Movement (Schlager, 1998).

² Christine Jorgensen was one of the first widely known individuals to have sex-reassignment surgery. Her surgery, which took place in 1952, was highly publicized and was one of the first well-known examples of Western public and media attention being given to transgender issues (Schlager, 1998).

³ Harvey Milk was a politician in San Francisco, and in 1977, his election to office as a San Francisco City Supervisor made him the first openly gay politician elected to public office in California. The publicity around his campaign helped to draw attention to gay rights and the larger gay community within San Francisco (Schlager, 1998).

The 1980s saw an increase in research into the LGBT community, a large part of which was, notably, related to the AIDS epidemic, and further legitimization of the “gay lifestyle” in the public eye. Much of the academic interest during this period was directed primarily at white, middle-class, urban gay male populations and, to a lesser degree, white lesbians, a fact that drew criticism from many scholars, activists, and members of the LGBT community (Bell, 1991; Binnie & Bell, 1999; Brown et al., 2007; Casey, 2007). Additionally, much of this research viewed sexual and gender minorities based on heteronormative standards, labelling them as “other” and, therefore, “abnormal,” rather than questioning the underlying assumptions that heterosexuality was the baseline for normality. It was a response to these issues that led many scholars to call for research that would criticize heteronormative ideas surrounding sexuality and gender and call into question the societal norms and structures behind these ideas, rather than automatically placing any who did not fit within those standards into the category of “other” and treating them as abnormal (Giffney, 2009). This call for a shift in the way studies of sexuality and gender minorities were approached, along with demands by LGBT advocates for equal rights and the work of scholars such as Michel Foucault, Judith Butler, Eve Kosofsky Sedgwick, and Dave Halperin surrounding sexuality, gender, and identity, resulted in the appropriation of the word queer by the LGBT community (Giffney, 2009; Johnson, 2010). Formerly used as a slur, the term is now meant as a mark of pride by those who use it, denoting that they are proud of their “queerness” and differences. As Alexander and Yescavage (2009) noted, it was in the 1990s that “the term ‘queer’...became transformed from a bigoted taunt into a rallying cry for those who resist[ed] any form of categorization and normalization” (p. 53).

This “resistance to categorization and normalization” was and still remains the basis for queer theory. Some of the work done both in and before the 1980s focusing on LGBT

individuals and issues around sexuality, gender, and identity can be considered the early precursors to modern day queer theory. However, it was not until the 1990s that queer theory started to gain momentum, and the term itself was first coined by Teresa de Laurentis in 1991 (Thomas, 2010). Queer theory, at heart, is not simply the study of sexual and gender minorities. While much of the work in queer theory does, naturally, focus on these populations, its ultimate goal is to “question the supposedly stable relationship between sex, gender, sexual desire and sexual practice,” thus challenging “the supposed correspondence between desires, identities and practice” (Brown et al., 2007, p. 8). By questioning the assumed and often taken-for-granted relationships between sex, gender, desire, and identity, queer theory seeks to challenge heteronormativity and to force a reconsideration of its underlying assumptions. Assumptions such as: heterosexuality is “normal,” and even within heterosexuality there are categories of behaviour that go against norms and are, therefore, undesirable (e.g. BDSM, promiscuity, not wishing to marry or have children); that homosexuality is heterosexuality’s direct opposite and therefore “abnormal”; and that there exists a binary system of gender and that these genders should correspond to physical sex and only be expressed in certain, socially acceptable ways (Brown et al., 2007; Giffney, 2009; Thomas, 2010). Queer theory has continued to grow and evolve throughout the past two decades, although not without receiving criticism for the direction that some of this growth has taken, both from scholars and members of the queer community. However, its focus on questioning heteronormativity and societal norms surrounding sex, gender, sexuality, and desire has remained constant. It is exactly this calling into question of heteronormative ideas and standards that was one of the driving reasons for my choice to use the word “queer,” as opposed to LGBT (or a similar acronym), in this research.

Despite my decision to use queer within my research, it should be noted that much of the other research in this area uses different terminology when discussing queer populations. Much of the research included in the background and literature review section of this thesis, and particularly much of the research that took place prior to 1990, made use of terms such as lesbian and gay, LGBT, transsexual, and sexual minorities. As such, there will be times when I use these terms in lieu of queer, particularly when they are a better fit for the discussion at hand or are required for an accurate discussion of the research. It is also important to remember that, while some of these terms are similar and can in certain cases be used interchangeably with queer, that each also has its own definition and nuances. Many of these changes in terminology are the result of shifts in the language that reflect changes in the overall culture and attitudes surrounding gender and sexuality, as will become clear in the following section and the discussion of the roots of queer health research.

2.2 The Roots of Queer Health Research

Until the early 1970s, queer health was not viewed by the majority of the academic and medical communities as a legitimate topic for discussion or research (Meyer, 2001). This was due to a variety of factors, perhaps the most significant being the homophobia and heteronormativity that existed as an inherent, accepted part of Western society. These attitudes were, in turn, reflected throughout academia and the health care professions. This is, perhaps, best illustrated by the fact that homosexuality was considered by many professionals and researchers to be a form of mental illness, a view that persisted until (and for some, even after) homosexuality was removed as a disorder from the American Psychiatric Association's *Diagnostic and Statistical Manual of Mental Disorders* in 1973 (Meyer, 2001). Gender identity and expression were similarly pathologized, with medical professionals often handing down a diagnosis of "Gender Identity Disorder (GID)" to transgender, transsexual, two-spirited, and gender queer patients. Unlike homosexuality, "alternative" gender identities have never been fully de-pathologized, although the term "Gender Identity Disorder" will be replaced with the slightly more neutral "Gender Dysphoria" in the upcoming DSM-V (American Psychiatric Association [APA], 2010; Beredjick, 2012).

While homosexuality and other forms of non-heteronormative sexuality and gender identity were the topic of scattered pieces of research prior to the 1970s, with the exception of a few studies such as Alfred Kinsey (1948) and the Institute for Sex Research's (1953) work in the 1940s and 50s on male and female sexuality, the subject matter was treated, for the most part, as a disease or an inherent flaw in those who either expressed, acted upon, or felt same-sex attraction, or refused to conform to cultural standards and expectations surrounding gender identity and expression. This view within the research and academic communities was largely

reflective of broader societal views and the stigmatization of lifestyles that did not fit within heteronormative standards. It was not until the 1970s and the gradual, and often grudging acknowledgement of lesbian and gay culture and “communities” in the main stream that researchers began to turn their attention towards the LGBT community as a group worthy of research (Dean, Meyer, & Robinson, 2000; Del Casino, 2007; Meyer, 2001). This increased interest was, in part, due to the efforts of activists and the visibility afforded to lesbian, gay, bisexual, and transgender individuals brought about by previously mentioned events, such as the Stonewall Riots, and in part because of a slowly growing interest in the social determinants of health and the health of marginalized populations (GLMA, 2001; Meyer, 2001). Studies focusing on lesbian and gay (and, to a lesser degree, bisexual and transgender) individuals, communities, and issues started to become more common, albeit slowly and not without opposition, in a range of academic fields, including medicine and public health. While the majority of this research, and particularly the research within medicine, focused on sexual behaviour and was problematic to a certain degree, this research helped to legitimize academic interest in sexuality studies involving lesbian and gay, and eventually queer, populations (Meyer, 2001).

Academic and research interest in lesbian and gay communities continued to grow into the 1980s. Much of this interest, particularly in fields concerned with health and disease, was a result of the public and professional attention paid to the AIDS epidemic (Fikar & Keith, 2004; Harcourt, 2006; Meyer, 2001). Gay and bisexual men in particular garnered a lot of attention, as they were largely affected by the AIDS epidemic and were the focal point of the majority of queer health research related to HIV/AIDS. There were fewer studies into queer women’s health by comparison, although research into breast cancer rates in lesbians from this period also exists (Fikar & Keith, 2004; Meyer, 2001). While the focus of queer health research broadened

throughout the 1990s and into the 2000s, the focus on HIV/AIDS, STIs, and general sexual health in gay and bisexual adult males has persisted, with a lack of comparable research into other areas of queer health (Harcourt, 2006; Meyer, 2001). It is also notable that research that focuses on queer individuals who are not middle class, able-bodied, and white is also scant, leading to a severe lack of representation of ethnic minorities and disability within the literature surrounding queer health, creating at best a skewed, incomplete picture of queer health.

2.2.1 Defining the Population

There are a variety of issues that have contributed to the gaps in the research pertaining to the queer health, particularly when it comes to methodology, the diverse make-up of the queer community, and unwillingness to participate in research for large portions of the community (Boehmer, 2002; Department of Health and Human Services, 2000; Fikar & Keith, 2004; Harcourt, 2006; Meyer, 2001; Silenzio, 2003). Methodologically speaking, there is currently a lack of consensus among researchers and even within the queer community as to accurate ways to define and identify alternative sexualities and genders (Boehmer, 2002; Harcourt, 2006; Silenzio, 2003). As public health researcher Vincent Silenzio (2003) stated in an article addressing public health interventions for men who have sex with men, “‘heterosexuality’ and ‘homosexuality’, although they may appear helpful on the surface, rarely live up to their promise of secure categories... such static descriptions of sexuality [cannot] capture the dynamic nature of sexual expression over time or provide insights into the culturally bound limits of these terms” (p. 867). Terms such as “men who have sex with men” (MSM) and “women who have sex with women” (WSW) have been introduced in recent years to try to address the differences between behaviour and identity (Boehmer, 2002). However, these terms are also problematic because they over-generalize behaviours and minimize the role of culture and community in individuals’

choices, while also failing to take into account how individuals self-identify (Young & Meyer, 2005). This can be problematic, in that some individuals who have had or are currently engaged in sexual relationships with others of the same sex or gender may not identify as anything other than heterosexual. Including these individuals in studies of MSM and WSW may, however, be the same for some as labelling them as LGBT or queer. Additionally, these terms fail to address the differences between physical sex and gender. For instance, when it comes to “men who have sex with men,” how do transgender men and women factor into this definition? Would a transgender woman who has not undergone sexual reassignment surgery and is, therefore, still physically “male” fall under this category if she has sex with men? What of a transgender man who has sex with men and is physically “female”? Additionally, how would an individual who identifies with a non-binary gender or with no gender category factor into these definitions? While simply equating them with their physical sex may seem like the simplest choice, doing so ignores large parts of those individual’s identities and could be seen as considering an individual’s biology to be more important than their personal identity.

Because of issues such as these, terms such as MSM and WSW can, in spite of good intentions, serve to perpetuate the idea that behaviour and even biology are the determining factors when it comes to sexuality, gender, and identity. These issues have led to the adoption of the term “queer” by some researchers in an effort to be more inclusive and convey an idea of sexuality and gender identity that is not based solely on behaviour (Young & Meyer, 2005). There have also been steps taken to create research instruments and data collection tools that are more inclusive. In 2003, Statistics Canada added a question about sexual identity to the Canadian Community Health Survey, and groups such as Rainbow Health Ontario are currently lobbying for questions about sexual attraction and gender identity to be included as well (Rainbow Health

Ontario, n.d.). In terms of gender identity, the Center of Excellence for Transgender Health (2012) has also developed a two-question method that may be used to more accurately capture survey data about transgender individuals. While the new terminology, additional advocacy, and acknowledgement of the lack of information about queer populations are all significant steps toward building a more complete picture of queer health and have brought attention to many of the problems with the ways in which sexuality and gender are defined in health research, there are still many issues that remain. Even use of a more inclusive term such as queer has not been enough to end the association of sexual orientation and gender identity with sexual behaviour where health research is concerned, nor has it ended the debate over exactly how the population should, or even if it can, be defined.

General disagreement within and between the research and queer communities regarding how to define the population have also led to issues with targeting queer individuals for research. Because of the natural variation between individuals and across cultures, sexual orientation and gender identity are difficult categories to narrow down and quantify (Harcourt, 2006; Mayer et al., 2008; Silenzio, 2003). As a result, researchers have had difficulty formulating questions that both target and are relevant to this population, particularly in large scale surveys and other such research tools (Harcourt, 2006; Meyer, 2001). This has lead much of the research into this population to be incomplete, unfocused, and non-inclusive. The choice of terminology that researchers use when recruiting participants and conducting research can, thus, be limiting and restrictive. Choosing to use LGBT, for instance, might attract a different group of participants than if one were to use "queer," which, in turn, could attract different participants than terms such as "non-heterosexual," "homosexual," "MSM or WSW," or "sexual and gender minorities." While many scholars and queer individuals would argue that queer is not just a synonym for

LGBT, it is still used as such by many researchers, without taking into account the underlying political and theoretical implications. This lack of clarity, both in health research and many areas of academia in general, only makes conducting research into queer populations that much more difficult. How do you compare research into “queer” populations when the term might mean different things to different researchers?

This problem is further compounded by the diverse nature of the group itself. Queer people cut across all ethnicities, genders, socioeconomic categories, religions, geographic locations, and ages, making it hard to say if results found within the research are due to sexual orientation and/or gender identity, or if other factors have a larger role to play (Dean et al., 2000; Harcourt, 2006; Meyer, 2001). A significant portion of the research also fails to take into account intersectionality and the ways in which other identities that individuals claim might influence their health. This can be attributed to a combination of factors, including pre-conceived ideas about the queer community and its overwhelmingly white, middle class, able-bodied public image; the often-criticized tendency by some portions of the community to be represented by “model queers” only; the lack of voice often given to people of color within queer academic and activist circles; and misconceptions that identifying as queer somehow negates or trumps other pieces of an individual’s identity. Much of the research into queer populations, and queer health specifically, also takes place from a decidedly Western point of view, which can often lead to Western ideas about sexual orientation and gender identity being used in discussions of non-Western groups and cultures that may not view sexuality or gender in the same way. Many researchers working with queer populations are also white, middle class, able-bodied, and cisgendered, another factor that may contribute to the lack of representation of minorities,

transgender individuals, and disability within queer research and which might also, in part, account for some of the issues with recruiting certain subsets of the community.

2.2.2 Research Difficulties: Terminology, Inclusion and Self-Identity

As mentioned in the previous section, queer is itself still a contested term and not one with which all sexual and gender minorities identify. Despite being viewed as more inclusive by many, there are still individuals who choose not to use it in reference to themselves for a variety of reasons. Related to this, researchers and medical professionals have also encountered problems with willingness on the part of sexual and gender minorities to self-identify in order to participate in research (Grossman & D'Augelli, 2006; Harcourt, 2006; Meyer, 2001). This is often because individuals hold different views of their own sexual and gender identities than those targeted by the researchers, which relates to the fact that many individuals identify primarily with ethnic, religious, cultural, or other groups, with their sexual or gender identity coming in second or, sometimes, not being considered an important part of their broader identity at all (Harcourt, 2006; Meyer, 2001). As a result, these gaps in the research and the overall issue with how to define the population make it more difficult to generalize research findings across the larger queer population (Harcourt, 2006). As Meyer (2001) pointed out:

White gay men in New York's Chelsea neighborhood share little with transgender sex workers just a few blocks away in Greenwich Village; with gay men developing a gay liberation movement in Guadalajara, Mexico; with lesbians in North Hampton, Mass; or with bisexual married women in Long Island, NY. (p. 856)

Another, related issue is that there is no set time when individuals “realize” their sexuality or gender identities. An individual’s sexual orientation and gender identity, and the way that they identify themselves in terms of these, can change many times over the course of their lifetime (Wright & Perry, 2006). While some individuals might claim the same sexuality and gender throughout their lives, there are many others who identify with different sexualities and/or genders at different points in their lives, and still others who may not consider sexual orientation or gender to be a relevant part of their identity at all. There is also no set timeframe for queer individuals to “come out,” either to themselves or to others, and sometimes the process of building an understanding and acceptance of one’s own self-identity as a queer person can take years (Halpin & Allen, 2004; Harcourt, 2006; Meyer, 2001). This is especially applicable to youth and young adult populations, where many individuals who may later identify as LGBT or queer have not yet claimed that self-identity or, if they have, are unwilling to share it with others for fear of ridicule, discrimination, or violence (Halpin & Allen, 2004; Harcourt, 2006; Silenzio, 2003).

Taken together, these issues have led to significant gaps in the literature. These gaps have meant incomplete and sometimes inconsistent research into a population that is already vulnerable and under-researched.

2.3 Queer Health Issues

In spite of the many issues faced by queer health researchers and the challenges in targeting and even defining the population, over the course of the past 35 years, researchers have collected enough data on the community to start drawing conclusions about some of the key health problems that queer individuals, and in particular queer individuals that fall within a certain demographic, face. These problems often include diseases that are found at a much higher rate within the queer community, or certain subsets of the community, than among the general population and tend to be in one of three main categories: sexual health, physical health, or mental health (Lee, 2000; Harcourt, 2006).

Sexual health has been the most often studied area of queer health by researchers, in large part because of the high profile of STIs such as HIV/AIDS within the gay and bisexual male population, the amount of funding available for such research as compared to other types of health research that may have less “concrete” results, and the greater availability of data that takes into account queer status relative to other diseases (Meyer, 2001; Wright & Perry, 2006). This issue is also still a significant one within the queer community. While HIV/AIDS prevalence rates among gay and bisexual men seemed to be on the decline in the late 1980s and early 1990s, there are still significantly high rates of new HIV infections and a high prevalence of AIDS cases in gay and bisexual men as compared to the general population, particularly within western industrialized countries (Public Health Agency of Canada, 2010). The Public Health Agency of Canada’s *HIV/AIDS Epi Updates* (2010) reports that gay, bisexual, and other MSM accounted for 45.1% of all positive tests reported and 44% of estimated new HIV infections within Canada between 2006 and 2009. Other studies have also found that there is a slightly higher prevalence among gay and bisexual men when compared with the general

population for other sexually transmitted diseases and infections, such as Hepatitis A, B, C, E, and G, and Syphilis (Harcourt, 2006; Public Health Agency of Canada, 2002). Gay and bisexual men are also at higher risk for contracting Human Papilloma Virus, which has been associated with an increased risk for anal cancer (Palefsky et al., 2000). Perhaps as a result of this, anal cancer rates in gay and bisexual men are currently dramatically higher than the general population, with rates that parallel the rates of cervical cancer found in women prior to the implementation and promotion of pap tests as a screening technique (Palefsky et al., 2000). Research has also shown a disproportionately high rate of HIV and STD infection among transgender individuals, ranging anywhere from 11% to 56% depending on the location and population being surveyed (Herbst et al., 2007). Some researchers have attributed these high infection rates to the reported prevalence of “risky” behaviours such as sex work, multiple partners, and unprotected anal sex among transwomen specifically, as well as the high rates of economic marginalization, victimization, social isolation, and physical abuse faced by large portions of the transgender community (Herbst et al., 2007).

STDs, STIs, and other related complications are not the only aspects of health in which the queer population faces problems, however. Although sexual health in general and HIV/AIDS in particular have garnered the most attention in terms of queer health, physical health is another category where queer individuals face increased risk, and one that has also been studied somewhat extensively. Researchers have found a higher prevalence of several other chronic and infectious diseases within the queer community, including some that are especially high within smaller subsets of the population (Boehmer, 2002; Dean et al., 2000; Harcourt, 2006). We see higher rates of lung cancer, colon cancer, and cardiovascular disease among queer men and women, mainly due to relatively high smoking and drinking rates throughout the community

as compared to the general population (Harcourt, 2006). There are also strong associations between certain diseases and smaller subsets of the queer community. For instance, gay and bisexual men face a higher risk for prostate cancer, non-Hodgkin's Lymphoma, and Hodgkin's disease than the general population (Brydon-Miller, Greenwood, & Maguire, 2003; Grossman & D'Augelli, 2006; Meyer, 2001; Palefsky et al., 2000). Lesbian and bisexual women have been found to have a higher rate of cervical cancer, breast cancer, and malignant neoplasms. These cancers also often go longer before detection than within the general female population (Boehmer, 2002). Lesbians have also been found to have higher average BMIs than other women, a fact that puts them at further risk for cardiovascular disease and stroke (Meyer, 2001; Palefsky et al., 2000).

Another important aspect of queer health, and one that has been somewhat understudied by comparison, is that of mental health. Because of their marginalized status and the social pressure placed upon them to either "conform" or "come out," many queer individuals are at increased risk for mental health issues. There have been several key studies that have observed increased rates of stress, depression, suicide, and other mental health issues in queer youth as compared to other youth (Halpin & Allen, 2004). Higher incidence of alcoholism, smoking, and recreational drug use have also been documented within the queer community, all problems that can lead to other sexual, physical, and mental health problems in the effected individuals (Palefsky et al., 2000). Queer youth generally face higher rates of victimization, including bullying and mental, emotional, physical, and sexual abuse, and are at higher risk of becoming homeless, with an estimated 22% of homeless youth identifying as LGBTQ (Department of Health and Human Services, 2010; Van Leeuwen et al., 2006). These risks combined with the pressure many queer youth feel to conceal their sexual orientation and/or gender identity because

of societal, peer, or familial pressure contribute to the higher rates of depression and other mental illnesses found among queer youth, and also likely contribute to queer youth being 2 to 3 times more likely to attempt suicide (Department of Health and Human Services, 2010).

While sexual, physical, and to a degree mental health have been widely studied, there has been other research, generally focused on a broader view of health, that seems to indicate that there are several factors that influence queer access to and use of health care resources. One of these factors is the general lack of knowledge about queer issues by health care providers. This seems to be especially true for the older generation of physicians and other health care providers, but it also carries over into the younger generations and even into current students in various health care fields (Kitts, 2010; Smith & Matthews, 2007). Many programs that train medical students provide very little information regarding queer issues, and thus many professionals are often unaware that many of these issues even exist (Kelly, Chou, Dibble, & Robertson, 2008; Sanchez, Rabatin, Sanchez, Hubbard, & Kalet, 2006). In addition to this, there is often very little in the way of pamphlets, websites, and other health information regarding these issues readily available for queer individuals. With health care providers uninformed and information often difficult to locate, this means that many queer individuals are often unaware of many of the risks to their own health. Attitudes of health care providers can also be dismissive, either intentionally or unintentionally, which leads to queer individuals feeling uncomfortable discussing matters that may relate to their own sexuality with them. In some cases, this can even lead to queer individuals avoiding health care unless absolutely necessary (Dean et al., 2000; Fikar & Keith, 2004). This, in turn, means that many queer individuals do not receive regular screenings and check-ups, which can lead to later detection of disease and significant problems in the long term (Dean et al., 2000).

Studies of queer desire and sexual behaviour are undoubtedly important, both in a health context and beyond. However, the approach to such studies, especially in the health field, is often one that tends to perpetuate the idea that such behaviour and desires are counter to “normal” (i.e. heterosexual) desires and behaviours (Meyer, 2001). Sexual behaviour is often equated with identity, a view that is only re-enforced by the emphasis on sexual health issues. Given that queer individuals face a range of health issues, many of which are not directly related to sexual behaviour, but rather to their status as marginalized individuals in society as a result of their sexuality or gender identities, broadening queer health studies to include more of an exploration of non-sexual facets of health is clearly important. Instead of focusing solely on the behaviour that makes queer individuals “different” and said behaviour’s negative impact on health, researchers should also begin focusing on the influence of heteronormativity and homophobia upon the health care system.

2.4 Place, “Safe Spaces” and Queer Health

In order to discuss safe spaces and what they mean in relation to health, it is necessary to first have an idea of what both “place” and “space” mean when used in an academic or research context. Place and space are terms that are often closely related and used in similar ways in everyday language, but they still retain somewhat distinct meanings. Generally speaking, place is often used in the western vernacular to refer to a concrete physical location, which is often specific and limited by certain boundaries, be they physical (i.e. the walls of a room) or intangible (i.e. the borders of a city, county, parish, state, province or country). Space, on the other hand, is often used to denote a more general, less restrictive physical setting, as is indicated by descriptors such as “spacious” (Tuan, 1977). These basic ideas, that space is broad and can be somewhat generalized, while place is much more narrow and specific, have carried over into the way that many western academic circles view the concepts.

In geography, place is often viewed as a meeting of different points or a specific location within space (Agnew, 2011). According to this usage, space is a larger, broader, and often less tangible concept, while place is a much more specific location within space, and one that has its own individual characteristics and make up. This means that it is not necessarily easy (or often even possible) to simply replace one place with another because of the specific characteristics and associations that an individual has with that place. Likewise, changing aspects of a place will also change individuals’ conceptions of and associations with that place, whereas changing aspects of a larger space, a much less concrete concept, will typically not have that effect (Agnew, 2011). While both terms are still highly debated and definitions of them can and do vary (especially when viewing them from a cross-cultural perspective), I have chosen to focus within this research on the most common conceptions of the terms that view space as a broad,

loosely defined area and place as a specific location within a larger space and individuals' interactions and associations with that location.

Initially, much of the work in geography and health viewed place as a geographical space within which individuals lived and acted. However, more recent work done from the 1990s onwards has expanded upon this view of place and has produced a newer definition that views it as part of the overall context experienced by individuals through their daily lives and actions (Kearns & Joseph, 1993). Place, therefore, is not merely a geographical space in which health is shaped and healthcare delivered. Rather, it is a phenomenon that can both influence health and be influenced by it. Place, then, is not just a where, but also a when, what, and whom. While the physical space itself is a large component of what makes a place, that space is then, in turn, shaped by our individual experiences, memories, perceptions, interactions with others, and even time itself (Agnew, 2011; Tuan, 1977; Kearns, 1993). Change any of these elements of a place, and the place itself and our perception and use of it are also fundamentally changed. This broader view of what place means has allowed researchers to look into the ways that individuals shape place and, in turn, influence health, rather than simply the ways in which it is shaped by them (Kearns, 1993). This has led to research that takes into account things like environmental impact on health, health outcomes for specific areas and neighbourhoods, and even the ways in which the layout and individuals' associations with a certain space can influence health, healing, and healthcare delivery.

One important question, however, is how exactly this understanding of space versus place fits in with the idea of safe spaces. The term itself uses the word "space," which according to the previous definitions would seem to indicate that it does not refer to a specific location. However, safe spaces themselves are generally specific locations found within buildings, campuses,

neighbourhoods, and cities, which would indicate that they are, in fact, places rather than spaces. I would argue that safe spaces can actually be both, and that the choice of the word space rather than place to denote this location is, in this instance, done purposefully to provide the concept with a meaning that is much less restrictive than the alternative “safe places” might be. As mentioned above, place often calls to mind a fixed point that can be viewed as narrow, confined, and even restrictive. Changing elements of a place can change the place itself, for better or for worse. Space, however, is a much broader and more malleable concept. By choosing to use space rather than place, it indicates that safe spaces should remain safe even if certain superficial elements of that space were to change. It also brings to mind expansiveness and the idea that safe spaces themselves are always growing and are not necessarily limited by physical or imagined boundaries. Tuan (1977) perhaps summarized it best by saying, “Space and place are familiar words denoting common experiences....Place is security, space is freedom: we are attached to the one and long for the other” (p. 3). For the purposes of this research, I would posit that safe spaces, despite the use of the word space in the title, can be both a place and a space, providing individuals with a sense of security through the promise of physical, emotional, and mental safety, while simultaneously allowing them the freedom to express themselves and their identities without fear of censure.

2.4.1 Medical Geography and Geographies of Sexualities

Place and environment have long been recognized as important factors in health, and this recognition has been the basis for much of the work done in the field of medical geography since the field’s beginnings in the late 1800s. Medical geography itself arose as an attempt to relate human diseases, cultures, and lived environments, and there has been a wealth of work done on

the effects of place on population health and disease rates (Kearns, 1993). Studies in this area have found that place, whether an actual site of health care delivery such as a hospital, a clinic, or a home, or a community in which health care is delivered, has an effect on the health of individuals within that space (Gatrell & Elliott, 2009; Gesler, 2005; Kearns, 1993; Kearns & Collins, 2010). Individuals living in socioeconomically deprived areas or neighbourhoods often have to travel longer distances to receive health care and, as a result, face poorer health outcomes. Further, studies into topics such as home births have shown that place can play a role in individual choice as to where to receive their care (i.e. in the home as opposed to a hospital) (Kearns, 1993). It is important to note that, in either situation, place can have both a positive and a negative influence on health, something that medical geographers have explored at length.

At the same time, medical geography has also started to move beyond the traditional, biomedical model of health and has started to explore broader definitions and ideas of health, such as those outlined by the WHO (Gesler, 2005; Kearns, 1993). This newly expanded view of health has allowed researchers the freedom to look into the ways that place influences social, spiritual, and other non-physical forms of health instead of focusing solely on rates of infection and disease. Much of the work in this area has been used to make policy decisions in areas such as urban development and public health and has helped health researchers gain a greater understanding of health in underserved areas and even among populations living in socioeconomically disadvantaged communities. However, this research has, as a whole, centered on health as it relates to healthcare, whether through direct delivery (or availability) of services or through prevention (Gatrell & Elliott, 2009; Kearns & Collins, 2010). While these studies have been useful in providing insight and have played an important role in some public health initiatives, there has been a distinct lack of focus on health as it relates to place unrelated

to the delivery of health care services. While health care services are an important facet of health, they are not the only facet of health. Just as previous efforts have broadened the definition of place within medical geography, continuing efforts should focus on further expanding the definition of health to one in which health care and biomedical outcomes are not the sole focal point.

While there has been a growth of research in medical geography recently, this growth, in general, has paid little attention to queer health and its relationship to place (Kearns, 1993). The studies that exist regarding queer health tend to emphasize place as it is used for the performance of sex acts and/or sexual expression, glossing over aspects of health and queer identity that are not related to sexual activity (Ingram, 1993). As with much of the other research into queer health, this emphasis on sexual activity is problematic. It not only causes problems with defining the population in question, but it also tends to overlook the fact that many of the individuals that utilize the places in question (e.g. bathhouses, clubs, public restrooms, sections or parks used for “hook-ups”) are often not representative of the “queer” population so much as of a subset of that population. The individuals who use these places (and who have been studied in these settings) are primarily young to middle aged white homosexual males or, less often, white lesbians (Ingram, 1993). While it is still important to study these subsets of the overall queer population, the continuing emphasis on white, middle class, urban gay and bisexual males is troubling, and in some ways continues to perpetuate the idea some harbour that “queer” is really equivalent with white, middle class gay men (Bell & Binnie, 2004; Browne, 2007a; Casey, 2007; Giffney, 2005; Knopp, 2007).

Some geographers, such as Binnie (2007), have criticized the approach taken to queer studies in geography, stating that much of the work done on non-heterosexual sexualities in the

field focuses on capitalism and everyday lifestyle, while ignoring the "erotic." While there has been an increased focus specifically on the erotic in geographies of sexualities over the years, it is my contention and the contention of this research that both the "everyday" and the "erotic" are important facets of queer individuals' lives and warrant equal attention. It is also important to note that a majority of the work done regarding queer communities in geography has focused on places that are clearly labelled as "queer," such as gay bars and clubs, men's and women's bathhouses, gay "ghettos," pride parades, and sites for "lesbian and gay" tourism. These studies have been important in promoting queer issues in the field and in countering heteronormative ideals about acceptable uses of space. However, the focus on places that are clearly marked as "queer" and the emphasis on sites of entertainment and commerce as opposed to places such as the home and work environment might, in fact, unintentionally perpetuate the assumption that most spaces, and especially public spaces, are inherently "heterosexual." While this may be the case in many instances, perhaps the assumption by researchers that many of these spaces are inherently heterosexual is not one that is shared by all parts of the queer community. Most queer individuals do not spend all of their time in spaces that are labelled as "queer," and while the study of these spaces is important in providing an idea of how queer individuals and communities form space devoted to their use, it is also important to see how queer individuals use, influence, and are influenced by the other spaces they encounter in their everyday lives, and how these presumably "heterosexual" spaces may function as safe or queer spaces in their own right.

2.4.2 Education and the Concept of "Safe Space"

Research into queer identity and place has not been limited to geography, however. Many of the other social sciences started to explore queer issues following the increased visibility of the queer community and queer issues starting in the late 1960s and, among these, education has placed particular emphasis on the interplay between queer identity and place. Much of this emphasis has taken the form of research into heterosexism in school environments and the presence or absence of “safe” spaces and the subsequent effect that these have on the well-being of queer students. While there has been no direct tie made within this research to health itself, the underlying focus on self-expression and well-being in these studies can be seen as related to the broader definition of health. Work by health researchers such as Blum (1974), Stokols (1996), and McElroy et al. (1988), which emphasized the role of environment (both physical and metaphorical) on health, further supports the connection between the concept of “safe spaces” in educational research and health. Safe spaces are generally seen as supportive environments that allow students to express their identities, feelings, and ideas without fear of discrimination or censure (Holley & Steiners, 2005). For queer students, this means a space that allows them to “be themselves” without facing ridicule or judgment. Having this type of environment available, especially in an academic setting and for youth and young adults who might not yet be able to express themselves so freely at home, is vital to overall health.

The idea of having “safe” space in the larger environment is an important one. Educational research looking into the negotiation of safe space in classroom environments has found that safe spaces allow students to “freely express their ideas and feelings” (Holley & Steiners, 2005, p. 49). This is important to queer youth in particular, by allowing them a place where they can freely express themselves with others who are supportive (Crowley et al., 2007). Universities have taken this idea and developed it into Safe Space programs, which attempt to

ensure that spaces are available throughout campuses where students are free of harassment regardless of their sexual orientation and gender identity (Draughn, Elkins, & Roy, 2002). These spaces are generally denoted by signs or stickers to let students, faculty members, and guests know that said space is a safe space and to act accordingly. However, it should be noted that there has been criticism for the way that safe space programs on some campuses are implemented and/or run. Some claim that simply having a safe space program is not enough and that many of these programs simply pay lip service to the idea of equality. While the majority of programs require that individuals wanting to display signage must either attend a short course discussing queer issues and the purpose of safe spaces, take a test, or qualify in some other way, this is not the case with all programs. This means that, while individuals joining these programs are sympathetic to queer issues and rights, they may not be fully aware of or informed about every aspect of queer life. Some have argued that this might cause some confusion on the part of queer students who wish to use safe spaces and assume that anyone who occupies or runs a safe space will be fully informed and offer them help and information about different issues (Draughn et al., 2002). However, to require individuals to be fully informed about all aspects of queer life before inclusion in safe space programs is problematic in and of itself, as it might discourage participation. There have also been further criticisms that many safe space programs do not go far enough in their attempts to promote queer rights and issues on campuses. As Draughn et al. (2002) stated, “Though they hold enormous potential for addressing homophobia and heterosexism in group-level interactions, Allies and Safe Zone programs tend to focus on preparing participants to provide individual support to LGBT students, while failing to address homophobic and heterosexist institutional environments” (p.10). It is important, then, that safe space programs not only provide safe spaces for queer students, but also question the

heterosexism inherent on most university campuses that may make other spaces unsafe by comparison.

Recent debates among medical geographers and feminist scholars have made place an important factor in their research, and have demonstrated that place can greatly influence health. This research focuses on “place-as-a-site-of-oppression” and posits that environment and place are often used to define a body and an individual as “healthy” or “ill” (Dorn & Laws, 1994). Deviant bodies, or those that go against social norms, are seen as not “fitting” into their environment and setting (Dorn & Law, 1994). Since queer individuals often go against many of the societal norms surrounding sexuality and gender and many of these norms carry over into space, both public and private, they do not, therefore, “fit” into their environment. This idea carries over into the academic and more specifically the university setting, where the assumption of heterosexuality and “normal,” outwardly visible gender categories that align with one’s physical sex can put queer individuals at a disadvantage.

While many may assume that universities are havens of liberal thought, this is not always the case. Despite the presence of courses in subjects such as women’s and gender studies, queer theory, and sexuality studies, broader societal norms, including heteronormativity, still hold a large influence over university courses and curriculum. Of the major universities in Canada, only a handful offer undergraduate minors in sexuality studies, and the University of Toronto is the only to offer an undergraduate major in sexuality studies. A few universities, most notably the University of Alberta, the University of Toronto, and York, offer interdisciplinary graduate courses of study that deal with queer issues as well. However, most of these programs are housed in other departments or scattered across campuses and lead by individual professors and researchers in various departments such as women’s and gender studies, sociology, anthropology,

psychology, history, education, or law. The interdisciplinary nature of these programs is a strength, but the lack of programs and courses dedicated to or even addressing queer studies is disconcerting. Queer studies at Canadian universities are often scattered and, like related programs in women's and gender studies and the humanities, typically lacking in funding and support. For those universities without majors or minors in sexuality studies or other programs related to queer issues, the availability of courses focusing on or related to queer issues is low. Whether intentional or not, this only further promotes heteronormative societal standards.

Research has shown homophobic and heteronormative attitudes (blatant or otherwise) and a general lack of awareness of queer issues among students and faculty across different disciplines such as social work, medicine, geography, and law, and throughout many university campuses as a whole (Bowen & Bourgeois, 2001; Draughn et al., 2002; Hayes & Ball, 2010; Rye, Elmslie, & Clamers, 2007). The work done by Hayes and Ball (2010) with law and social justice students' conception of queer identity suggests that many of the heteronormative attitudes held by students may not be overt, and that some students may harbour these attitudes in some areas (namely in expressions and discussion of same-sex sexual acts, affection, and desire), but are open to or even supportive of queer rights and issues overall. While this is encouraging and seems to support that many attitudes regarding alternative sexualities and gender identities are changing, they still suggest the overall assumption that heterosexuality is the "normal" state of being and that expressions of sexuality and gender identity that do not fit within this norm, while they may be tolerated, are still somehow 'other.' The lack of discussion surrounding queer individuals and issues in the classroom only further compounds this problem and, as the work by Bowen and Bourgeois (2001) in the U.K. suggests, may even serve to heighten the perceived amount of homophobic and heterosexist attitudes on campuses by many students. Some research

has suggested that one way to counter these types of attitudes may be increased exposure to queer individuals and/or curriculum focused specifically on queer issues (Foreman & Quinlan, 2008; Kelley et al., 2008; Rye et al., 2007), but these are steps that many universities have yet to take. As such, the classroom and campus environment is not always a friendly or welcoming one for many queer students. Thus, the presence of designated “safe” spaces for queer students is important, as they are able to provide a safe haven for students to openly discuss sexuality and gender issues and express themselves, while raising awareness of queer issues and presence on campuses.

Although the research in education has not explored or connected the idea of safe spaces and health directly, it generally views place as more than just the location for potential sex acts. Desire and spaces that are used for the expression of that desire are important and in need of study. However, sexual health and desire are not the sum total of queer identity, and the view of space and queer identity that is not related directly to sexual health and desire is one that should be expanded beyond the realm of educational and, to a lesser degree, geographical research. Considering the wide variety of health risks that queer individuals face and how many of those are not solely related to sexual or even physical health, exploring the influence of environment and use of space on all aspects of health is only logical. Building upon this view of place and relating it to queer health could help to shift the emphasis within queer health research away from the current sex-centric view to something that is more all-encompassing.

2.5 Bridging the Gaps

The gaps in knowledge found in the literature around queer health are troubling and have led to a lack of information not only among health researchers, but also among doctors and other health practitioners. This lack of information, in turn, has led to some of the poorer health outcomes found within the queer community (Boehmer, 2002; Meyer, 2001). Further study in this area could provide health care providers, families, teachers, policy makers, and queer individuals themselves with the information that will aid them in improving their own personal health, along with that of the community. However, bridging these gaps is very often easier said than done. They are, as shown, deeply ingrained in the research paradigm, and that of health research in particular, and often taken for granted. In order to overcome these gaps, a few of their underlying causes and the assumptions that they are based upon must first be challenged.

The first issue that I chose to address with this research was the focus within queer health research on sexual activity as a marker of identity. While sexual activity is certainly an important expression of self for some, it is not the sole definition of who an individual is as a person. Further, as already discussed above, many people do not connect their own sense of identity and “who they are” with their choice of sexual partners or sexual behaviour. To combat this assumption, I chose to adopt the more inclusive term “queer” to refer to participants within the body of the written text, rather than a term such as MSM or WSW, which place a stronger emphasis on sexual activity versus identity. Use of this term allows for a broader perspective on identity that goes beyond a focus on behaviour to include social and cultural aspects of identity. In addition to this, I focus on those who choose to self-identify as queer, which allows potential participants to identify themselves as a part of the queer community, regardless of past, present, or future sexual activity. Lastly, I utilize a much broader definition of health and attention is

paid to the many facets of health, including the physical, mental, emotional, and social (Saskatchewan Provincial Health Council, 1999). While I did not actively ignore expressions of sexuality and discussion of sexual activity and desire with participants, they were not the sole focus of the research. Combined, these all served to focus this research on a broader view of the individual and their identity that was not centered on behaviour.

Over the course of this research, I also attempted to address some of the problems with interview questions and instruments aimed at the queer community. I did this by calling into question the idea that questions and instruments aimed at some pre-conceived notion of what it means to be “queer” are the best method for conducting research with this group. This focus on pre-conceived notions of what it means to be queer and attempts to fit research participants to these notions is damaging and has contributed to many of the gaps within the health research literature. Challenging this idea also challenges the focus within queer health research on sexual health, opening it up to a more encompassing view of health. It is my hope that calling into question these pre-conceived notions of queer identity will bring to light the heteronormative standards often imposed upon queer individuals, both by portions of the queer community itself and by society as a whole. These standards often define queer individuals not by who they are, but by what they do or, more often, do not do and place them in the category of “other.”

Lastly, this research aims to give a “voice” to queer young adults that is often lacking within health research. This is achieved by using an action research methodology, which “is grounded in the participatory worldview” (Brydon-Miller et al., 2003). Action research also allows participants to be involved directly in the research not just as “subjects,” but also as co-researchers (Richards & Morse, 2002). It does this by allowing them input into research focus and the interpretation of research data, both important elements in providing voice for otherwise

unheard populations. For these reasons, many researchers have begun to utilize this research method when working with marginalized or vulnerable populations. Additionally, this research employs Photovoice, a tool that has recently become more common in both action and health research, and which allows participants to document aspects of their lives and social settings and to express their daily experiences and self-identity in the form of photo images (Palibroda, Krieg, Murdock, & Havelock, 2009). The combination of these allows participants a non-verbal means of expressing themselves. This, along with the more traditional verbal means of expression utilized in participant interviews and group meetings, provides participants with an additional opportunity to find the “voice” that they have otherwise been denied.

3.0 METHODOLOGY & RATIONALE

As mentioned in the previous section, I drew upon ideas and concepts from a variety of disciplines as a theoretical basis and inspiration for this research. I was inspired to undertake this project due to many of my own experiences as a queer woman, along with the experiences of friends and relatives who are also queer. While the gaps in the literature discussed in the previous section may be large and somewhat daunting, they are not impossible to address. Taking a cue from this literature and my own academic background, I explored possible methods for addressing these gaps prior to beginning this research. In this section, I will detail the methods chosen for this study, as well as the rationale behind their choice.

This discussion is broken down into four major sections, including an exploration of my own personal experience and background, involving both academics and life experience; an examination of the setting for the research in terms of Canada, Saskatchewan, Saskatoon, and the University of Saskatchewan campus; and separate discussions of both action research and Photovoice methodologies and how they were best suited to address this topic.

3.1 Personal Context

When I first came to the University of Saskatchewan to study Community Health & Epidemiology and began to learn about health disparities, health within the queer community was one of the first research areas that came to mind. This was for a variety of reasons: I am a bisexual woman and have friends and family members within the community; I have seen myself and many of those friends struggle with depression, self-loathing, and prejudice as a result of our sexual orientation or gender identities; and both as a high school student and later as a substitute teacher in a rural, Midwestern American high school, I saw the struggles faced by students who either identified as or were believed to be queer.

The majority of these experiences, as a queer woman, as a friend, peer, and relative of queer individuals, and as a teacher with queer students, took place within a mostly rural context. I was born and spent the majority of my youth and young adulthood in a small town in central Missouri. The elementary, junior high, and high schools that I attended and later taught at, like the place that I lived, were small and made up almost exclusively of white, working or middle class individuals. None of the towns where I attended school had a population over one thousand, and the majority of the residents seemed to be either related to one another or family friends (or friends of family friends). New faces in town were a novelty and often a cause for excitement, and new kids in town always learned quickly to blend in if they did not want to keep being the center of attention. It was not a terrible place to grow up, all things considered, but the atmosphere could often be quite stifling. This was especially true if there was anything about you that made you "different." As such, I knew of very few openly lesbian, gay, bisexual, or transgender people while I lived there.

This sentiment, while not as strong within youth and young people in the community, still influenced the way that many of my friends and classmates (including myself) approached sexualities and gender identities that existed outside what was considered "normal." If your opinions differed at all from the general view that heterosexuality and culturally accepted ideas of "masculine" and "feminine" were the only "right" views, you only voiced these opinions to friends that you felt particularly close to and knew shared your opinions. If you knew or thought you might be queer yourself, you generally did not discuss it until you could get things sorted out on your own or waited until after you were out of high school (and often out of town) to be open about it.

In the classroom, actual discussion regarding alternative sexualities or gender identities only took place in a few select classes, with the two or three teachers who were willing to address such topics or allow students to discuss them without silencing the conversation. Queer issues were not included in the curriculum, and I cannot imagine that the administration would have allowed them to be, even if teachers had pushed for their inclusion. When such topics did come up in classroom discussion, it was generally somewhat incidental and in a class with a teacher and other students who were fairly open-minded about such things. Even then, conversations were always general and never addressed any student's individual sexuality or gender identity. More in-depth conversations typically only happened in smaller classes, with students who were not likely to mention the topics being brought up to parents or school authorities and get any of the students or teachers involved in the discussions in trouble. Although they were never articulated as such and I never gave it much active thought at the time, these classes and groups constituted a "safe space" for me and others who either identified as

queer or were curious about sexualities and gender identities that did not fall within the "mainstream."

These experiences all lead to my interest in queer issues in general, and queer health in particular, and prompted me to begin doing some background research into the subject. This eventually led to the inclusion of these topics in my thesis. I found it enlightening to see the increasing research interest in queer populations and to read the work that already existed in this area. However, even with the gradual shift in attitudes that has taken place over the past few decades, it was disheartening to see the many gaps that still existed within the literature. Most of the research that I found focused on sexual health in general, and sexually transmitted infections in particular, and ignored many of the other non-biological aspects of health. The majority of studies also addressed either lesbians or gay males, with bisexuals, transgender, and other queer individuals given no more than a token nod to legitimize use of terms such as LGBT and queer. In many cases, it felt as though LGBT research was really lesbian and gay (and even more precisely, gay male) research, with bisexuals and transgender individuals being the less important piece of the acronym. Knowing what it was like to grow up queer and the lack of power that one sometimes feels that they possesses inspired me to pursue research into this area, and to do so in a way that would give queer young adults the ability to speak about their own experiences.

3.2 Being Queer at the U of S

After taking into account both my own experiences and my discussions with committee members, it was clear that place would play an important role within this research. Educational research has shown that the ways in which students negotiate space plays a large role in their everyday lives, health, and the education that they receive (Crowley et al., 2007; Holley & Steiner, 2005). However, given the relative lack of research directly into queer student health and safe spaces in the university setting, it is clear that more needs to be done in this particular area. Research taking place in western Canada, and in Saskatchewan in particular, is also lacking. Much of Canadian queer health research has focused on cities such as Toronto and Vancouver, which boast relatively large queer populations and often even contain queer neighbourhoods or districts. While the focus on these areas seems logical given the size of the queer populations available, it still leaves rural areas and smaller cities such as Saskatoon vastly underrepresented within the research. This, in turn, only seems to perpetuate the idea that queer individuals only live in large cities and that queer communities in smaller cities or rural areas are uncommon to non-existent. These ideas can be harmful to queer individuals living outside of large urban centres and can contribute to feelings of difference, otherness, and isolation, while also ignoring that human experience is not universal and can be greatly influenced by place. Increasing the amount of research that takes place outside of large cities will, therefore, help build a more complete picture of queer issues overall.

Given the lack of research into queer life in western Canada, it was important for this research that I understood what it means to be queer in the context of the province of Saskatchewan, the city of Saskatoon, and the University of Saskatchewan campus. While there have been many significant social and political developments in recent years to promote equality

for and recognition of sexual and gender minorities within Canada, homophobia, heterosexism, and discrimination are still significant issues. This can be especially true in smaller, more rural settings, which can sometimes be more conservative in their values. Within the more rural, western Canadian provinces such as Saskatchewan, there is an often difficult relationship between recognition of queer individuals and communities and suppression of their rights. Larger cities such as Toronto, Edmonton, and Vancouver are generally considered more "queer friendly," but Saskatchewan has its own long-running history with the queer community. Gay rights groups, including the longest continuously-running lesbian and gay organization in Canada, the Gay and Lesbian Community of Regina (GLCR), have existed in the province since 1971 (Richards, 2005). Around the same time, activists such as Doug Wilson, along with student-lead gay rights groups, started working to bring attention to gay rights issues on the University of Saskatchewan and University of Regina campuses. Outside of the university campuses, other activists and community groups worked to bring similar attention to gay rights throughout the cities of Saskatoon, Regina, and the province as a whole, often to mixed results (Richards, 2005). This history of queer activism within the province, city, and on the university campuses is one that has continued into recent years with events such as the University of Saskatchewan's annual Breaking the Silence conference aimed at addressing queer issues in education, the adoption of the Positive Spaces program, and the existence of programs like Camp Fyrefly, a camp for sexual and gender minority youth that celebrates queer identity. At the same time, however, lesbians, gays, bisexuals, transgender individuals, and others queer people are often an "invisible" presence within the broader community, with people only being aware of their presence because they are either part of the queer community themselves or know someone else who is.

Saskatchewan is a largely rural province located in the Canadian Prairies, with a number of small towns, villages, and rural municipalities. Saskatoon is the province's largest city, with a population of 222,000, accounting for roughly 21% of the province's population (Government of Saskatchewan, 2012; Statistics Canada, 2012). The city is home to the province's largest university, the University of Saskatchewan, and is where the majority of the university's students live. As the largest urban centre in Saskatchewan, Saskatoon is one of the hearts of queer culture in the province. The city boasts an annual gay pride parade, night clubs catering specifically to queer individuals, and organizations such as the Avenue Community Centre for Gender and Sexual Diversity, all of which help promote queer issues throughout the province. However, these organizations are generally funded by private donations, often receive little support from government or other formal structures, and are vulnerable to shifts in governmental and public sentiments that can strip away the little public and private funding they do receive. The Rainbow Health Coalition, one of the only organizations devoted to queer health issues and promotion in Canada, is a good example of this. The organization is now little more than a website, having had to cease most of its activities several years ago due to a loss of funding after a change in the provincial government (Rainbow Health Coalition, n.d.). While similar organizations exist in other provinces, the most notable perhaps being Rainbow Health Ontario, there are currently no organizations in Saskatchewan devoted solely to promotion and education surrounding queer health. Even though the work of present and former queer-oriented organizations within the province has been significant, awareness of queer issues by the general population is often still lacking. Saskatoon is still a small community in comparison to many other urban centres within Canada and in many respects reflects more "traditional," conservative values. As a result, many of those in the community who are not queer themselves or do not have direct ties to the queer

community are often unaware of queer issues or even the presence and size of the queer community within the city and the province at large.

The University of Saskatchewan is the largest of only three universities in the province, with a total student population of just over 21,000. Of these students, the majority are undergraduates, with 17,000 students pursuing undergraduate degrees and only 3,000 working toward graduate degrees (University of Saskatchewan Data Warehouse, 2012). The university attracts many students from the more rural, outlying communities in Saskatchewan, as well as students from the province's larger urban centres such as Saskatoon and Regina, and in less significant numbers, students from other areas of Canada and the world (University of Saskatchewan Data Warehouse, 2012). International students make up roughly 10% of the overall student population, compared to the estimated 5.5% of the overall provincial population that are not Canadian citizens (Government of Saskatchewan, 2007; University of Saskatchewan Data Warehouse, 2012). This leads to an interesting blend of ethnicities and cultural backgrounds within the student population on campus. For many students from rural communities, their time spent at the University may be their first significant exposure to individuals who have backgrounds and ethnicities that differ from their own, including individuals who openly identify as gender and sexual minorities. While there are, of course, queer individuals present in rural communities, these individuals may be less inclined to be open about their sexual orientation or gender identity than individuals who live in more urban centres where there often exist queer communities and so-called “alternative lifestyles” may be more readily accepted (Bell & Binnie, 2004). As a result of this increased contact with the queer community and, in some cases, distance from home communities and family members, some university students may feel freer to explore their own sexualities.

The University of Saskatchewan is among a number of Canadian universities that have a program to promote safe spaces in place. This program, called "Positive Spaces," is aimed at “reduc(ing) homophobia and heterosexism on campus and promot(ing) a safe, welcoming environment for students who are lesbian, gay, bisexual, transgendered, transsexual, two-spirited, intersexed, queer or questioning” (Discrimination and Harassment Prevention Services [DHPS], n.d.). It does this by encouraging members of the campus community, including students, faculty members, and staff, to display printed material that identify spaces around campus as positive spaces, demonstrating that these spaces are intended to “welcome and support LGBTTT2IQQ individuals, encourage open, respectful communication and eliminate the need for people to hide their sexual orientation or gender identity” (DHPS, n.d.). These spaces are meant to counter the discrimination that queer students may face as a part of the campus community and to broaden the horizons of other students in the hopes of encouraging them to become allies to the queer community. However, while the presence of this program and ones like it have made significant progress in supporting queer students and making the campus a safer, more inclusive environment, there are still many issues that queer students at the University of Saskatchewan face.

Discrimination, prejudice, and heterosexism are still prevalent on the University of Saskatchewan campus, as they are within the broader community and society at large. This is perhaps best reflected in the noticeable lack of queer issues in the curriculum on campus. The university does not offer a major or minor in LGBT, sexuality, or queer studies and the listing for LGBTTT2IQQ courses on the Pride Centre’s website currently only has two courses listed as being focused specifically on queer issues (USSU Pride Centre, n.d.). Classes with content focusing on queer issues exist on campus, but they are often hard to find, given the lack of one

centralized place to search for them. Subjects such as education, women's and gender studies, psychology, sociology, anthropology, history, and literature all offer the occasional class that discusses queer issues, but these classes are still only a handful among many, and some are highly specialized and only offered once every few years. The College of Medicine and School of Physical Therapy have recently begun incorporating some queer issues into their curriculum, but only as short sections of much longer courses and not as classes devoted to queer issues in their own right. This lack of visibility of queer issues within the academic setting on campus sends a mixed message to students, showing that queer identity is supported in the "social" aspects of student life, but not within academics.

This lack of attention to queer issues outside of designated areas and classrooms suggests the need for increased visibility of queer issues for the campus community at large. This need for increased visibility and access to information regarding queer issues lead me to seek out a research methodology that would allow me to provide this greater visibility to both individual participants and the community as a whole, while also allowing for more involvement and active participation on the part of the participants. Using these criteria and taking into account my own academic background and experience, I finally chose a combination of the action research and Photovoice methodologies outlined in the following sections.

3.3 Action Research

As stated previously, the lack of experientially-based studies and “voice” found within studies of queer health (particularly those focusing on young adults), coupled with my own experiences, lead me to want to pursue research that would both increase the knowledge in this area and would enable these young people to speak for themselves. Exploring the possible options helped me to realize that qualitative research was the ideal way to accomplish this, as it would allow me to “seek [an] understanding of data that [is] complex and can be approached only in context” (Richards & Morse, 2007, p. 47). It is also ideal for exploring areas in which little research has been done, and thus was a good fit for the topic of queer health, given the lack of previous research in this area. In addition to this, the intensive nature of qualitative research allowed a richer description of the experiences of my participants and also allowed my work to be more in tune with their personal needs and wants by allowing them the ability to actively participate in the research process (Richards & Morse, 2007).

Previous research with queer young adults has largely been quantitative in nature, particularly when the focus is on health issues, but a few researchers have also used qualitative methods to explore queer health issues. The majority of these qualitative studies have largely focused on interviews and focus groups and have used questions that are pre-determined by the researchers, either on their own or as the result of preliminary results from pilot interviews. While these studies have made significant contributions to knowledge of queer health issues, their focus is often based on the researcher's perspective on issues and participants have little say in their content or focus. Action research and Photovoice methods, both of which are aimed at empowering and giving voice to disadvantaged populations, are relatively underutilized within this field.

My desire to help empower queer youth and young adults and to work closely with the queer community helped to narrow my interests from qualitative research in general to action research in particular. Action research is “conducted by a team of professional action researchers and stakeholder members...with the goal of seeking to improve their situation” (Richards & Morse, 2002, p. 61). Further, it is “conceptualized, designed, and conducted by researchers who are insiders of the culture” (DePoy & Gitlin, 2005, p.114) and is “concerned with developing practical knowing in pursuit of worthwhile human purposes....It seeks to reconnect action and reflection, theory and practice....It grows out of concern for the flourishing of individuals in their communities” (Reason & Bradbury, 2008, p. 4). The ability to work with participants as co-researchers, to empower them, and to gain knowledge that might be applicable in improving their daily lives was a perfect fit for both my interests and the purpose of this research. It allowed me to work in tandem with my participants, to ensure that they were more actively involved in the research, and to produce research that addressed issues that were important both to the participants as individuals and perhaps even to the larger queer community at the University of Saskatchewan.

3.4 Photovoice

Since this research planned to focus on students and would be using place as a lens, I wanted to include a piece within the research process that would fully engage participants and allow them to express themselves in non-verbal ways. Given my own interest in photography and visual anthropology, I decided to explore methods that utilized both of these for this project. It was this exploration and a subsequent review of the literature that led me to Photovoice methodology. Research has shown that non-verbal channels of communication are often more important than words alone (Palibroda et al., 2009). Researchers Wang and Burris (1997) coupled this idea with the belief that “what experts think is important may not match what people at the grassroots level think is important” (p. 370) to develop Photovoice, a method which “blends a grassroots approach to photography and social action...[by] provid(ing) cameras...to those who have the least access to those who make decisions affecting their lives” (p. 369). Wang and Burris (1994; 1997) originally used this tool to help catalogue the everyday health and working conditions of Chinese village women, and it has since been used to address a wide-range of health and social issues. Photovoice has also been widely used as a tool with marginalized populations, as it gives these otherwise “silent” populations a “voice” and allows them to demonstrate to others how they view their own lives and the world around them, while also providing a powerful means of demonstrating the broader societal issues and disadvantages that these populations face (McIntyre, 2003; Wang, 1999; Wang & Burris, 1994).

By providing my research participants with cameras and allowing them to photograph their own lives and in this way represent their community and self-identities, I allowed them to represent the strengths and weaknesses of their community, promote discussion of important issues through group dialogue, and to create a visual representation of the work to present to the

greater community as a whole (Palibroda et al., 2009). As this research also utilized action research methodology, these photographs also allow for the possibility of sharing findings with the broader campus community and provide a visual catalogue of safe spaces on campus and throughout Saskatoon

Given the lack of research and information about queer students at the U of S, this was an ideal method for allowing participants to actively share their lives and experiences with others. It also provided a concrete representation of safe spaces as the participants viewed them. The pictures taken in this research, thus, not only allow the sharing of images of safe spaces with the broader community, but also facilitated discussion about these spaces in interviews and group meetings by providing a visual reference point for participants.

4.0 DATA COLLECTION

A variety of data collection methods were utilized over the course of this project. The rationale behind the use of each has already been addressed in the previous section, so this section will discuss how these methods were employed, from recruitment through the end of the study. The methods chosen for data collection included: informal group interviews, Photovoice, and semi-structured individual interviews. These methods were used to varying degrees throughout the course of the project in order to achieve the main objective of the study and to address the various questions posed alongside these objectives. This section further details how these methods were applied and some of the challenges that occurred during the data collection process, broken down into the following topics: an overview of the study participants, details of the recruitment process, and discussion of the group interview, individual interview, and Photovoice portions of the project. The section concludes with a discussion of study context, including additional information about Saskatoon and a brief background on some of the key locations that are included in the results and discussion portion of this thesis.

4.1 Participants

Students at the University of Saskatchewan come from a variety of backgrounds and are comprised of various ethnicities, nationalities, cultures, classes, sexual orientations, genders, and religions. Roughly two-thirds of the students at the university come from within province and an estimated 15% of currently enrolled students identify as either Aboriginal or a visible minority (University of Saskatchewan Data Warehouse, 2012). While the majority of the over 21,000 students at the university come from within Saskatchewan or its neighbouring provinces, roughly 20% of students come from other parts of Canada or the world (University of Saskatchewan Data Warehouse, 2012). There are to date no statistics on the number of sexual and gender minority students at the university. However, while there is more diversity within Saskatoon and on campus than found in many of the more rural areas of the province, it is still important to remember that the student body is still predominantly white, middle class, cisgendered, and heterosexual.

The original target for this study was a sample of 5 to 10 first year University of Saskatchewan students who self-identified as queer. Focusing on individuals who self-identified with the label queer allowed the research to focus on participants' self-identity rather than assigning identity labels based on sexual behaviour. Initial recruitment also focused on first year students because of their relative newness to campus. I believed that their adjustment to campus life would allow for a unique perspective, as most would be, presumably, new to the campus life and environment. The number of participants was chosen to allow for enough data to be gathered to feasibly address my research questions and purpose without being outside the scope of a Master's thesis, given the nature of qualitative research and the amount of data to be collected and analyzed from each participant. The target sample size remained the same throughout the

study. However, because of the lack of response from first year students during the recruitment process, the target population was expanded from first year students, first to include all undergraduate students who self-identified as queer, and later to include graduate and certificate students as well. These amendments were made in order to be able to achieve the minimum sample size. While the reasons for the lack of interest by first year students are unclear, it may be that the population was too small, that the recruitment methods being used simply did not reach them, that the students in this group felt uncomfortable discussing their sexuality, or that they were simply too busy adjusting to university life and did not have the time or interest to participate in research.

Participants' ages ranged from early 20s to mid-30s and all participants, being over the age of 18, were over Canada's legal age of consent. Participants were all also required to be "out" (using their own, personal definition of what they considered to be "out") within the community. The assumption behind this particular requirement was that participants who were out would be more likely to be comfortable discussing their sexuality and gender identity and would also have a higher likelihood of having strong social support networks including family, peer groups, the university community, and/or other aspects of the larger community. This was also meant to help mitigate any potential negative consequences of the study and to lessen the risk for possible "accidental outing" of participants through their participation in the study. The individuals who participated in this study had all been out for varying amounts of time and indicated that their friends and family members were already aware of their sexuality.

A total of seven participants were recruited for the study, with two of these individuals dropping out of the study before completion of the Photovoice portion of the project. The final group of participants consisted of six men who identified as gay/queer (two of whom dropped)

and one woman who identified as bisexual. Participants were mostly undergraduates in their second through fifth years of study, with the exception of one participant who was in their first year of study in a certificate program. The participants came from a range of academic majors, including: Medicine, Business, English, Physics, and Anthropology. They also mostly came from within Saskatchewan, with two of the final group of participants originally from Saskatoon, two from small towns/cities within Saskatchewan, and one participant from Alberta. Several of the participants also had experience traveling or had lived in other provinces and cities within Canada, including Toronto, Calgary, Edmonton, Vancouver, and several small towns in Alberta. Participants were all white and from working or middle class backgrounds. None of the participants had ever participated in Photovoice research before, and only one was vaguely familiar with the concept prior to this research.

In order to maintain anonymity, I use pseudonyms for participants throughout the body of this thesis. A brief description of the final group of participants is as follows:

- **Derek** is a certificate student in his late 30s. He identifies as a gay man and was born and raised in Saskatoon, although he has spent several years living in other cities as well.
- **Scott** is a third year undergraduate student in his mid-20s. He identifies as a gay man and was born and raised in a small town in rural Saskatchewan.
- **Isaac** is a fourth year undergraduate student in his mid-20s. He identifies as a gay man and spent his childhood in several different small towns throughout Saskatchewan and Alberta.
- **Danny** is a medical student in his mid-20s. He identifies as a gay man and was born and raised in Saskatoon.

- **Lydia** is a third year undergraduate student in her early-20s. She identifies as a bisexual/ambisexual woman and was born and raised in a small city in Saskatchewan.
- **Matt and Jack** are undergraduate students in their mid-20s who identify as gay men. Both participated in the initial orientation session and group discussion, but did not complete the Photovoice or individual interview portions of the study. As they did not withdraw their consent for earlier parts of the study, their group interview contributions were included in data analysis.

4.2 Recruitment

Recruitment for the study took place from September 2010 to August 2011 and utilized several different strategies. These strategies included ads posted through the University of Saskatchewan Students' Union (USSU) Pride Centre, an ad posted in the University's online PAWS newsfeed, flyers posted at different locations around campus, and word-of-mouth and snowball sampling.

The original intent of the study was to primarily recruit through the USSU Pride Centre, a student run and maintained group that provides support to undergraduate queer students on campus. This organization is under the supervision of the University of Saskatchewan Students' Union, the governing body for all undergraduate, extension, and certificate students on the University of Saskatchewan campus. Membership in the USSU is mandatory for all undergraduate, extension, and certificate students, and as such, participation in USSU run groups, including the Pride Centre, is open to all students who fall under these categories and have an interest in the group's activities. The Pride Centre is physically housed on the first floor of the Memorial Union Building on the U of S campus and "seeks to... [create] an open and progressive environment that advocates, celebrates and affirms sexual and gender diversity" (USSU Pride Centre, n.d.). It does so by providing in-person peer support, web-based support in the form of links to a queer-safe housing registry and resources for queer issues in education, training and making available speakers knowledgeable in queer issues, and holding weekly discussion groups on topics concerning sexual and gender diversity (USSU Pride Centre, n.d.).

The rationale behind using the Pride Centre to aid in recruitment was that students who were aware of and made use of their services would be more likely to have supports in place, both through the Pride Centre and the various peer support groups and programs that the Pride

Centre provides to queer members of the University of Saskatchewan community. Since it is also an organization aimed at queer students on campus, it seemed logical to assume that advertisements placed there would be more likely to reach the group that I was hoping to involve in this research. Additionally, the Pride Centre promotes the Positive Space program on campus, so involving them in this research seemed reasonable.

Advertisements for participants were placed on the announcement board within the centre's designated office space on campus and were also posted on the group's Facebook page. However, as these advertisements yielded very few results, an ad was taken out in the university's online PAWS (Personalized Access to Web Services) newsfeed advertising the study, and recruitment flyers were also posted on message boards throughout campus following approval from the University's Behavioural Research Ethics Board (for a copy of the recruitment flyer, see Appendix J). I also made use of word-of-mouth and snowball sampling. Several of the participants were made aware of the study by friends or acquaintances that either read the advertisements or were participating in the research themselves. These additional methods yielded much better results than the advertisements placed through the Pride Centre, with six of the seven participants being recruited in these ways. The PAWS advertisement was particularly successful. The participants in this study were, as discussed in the previous section, from a diverse number of majors and representative of the general student body at the U of S, and were also incredibly enthusiastic about the work being done.

4.3 Orientation Session

After potential participants responded to the recruitment advertisements, I met with them individually to discuss what they might expect from the study and to ensure that they fit the inclusion criteria (i.e. a current U of S student, “out” in the community and comfortable openly discussing sexuality and gender identity, 18 year of age or over, and not a student currently enrolled in one of the courses for which I was a teaching assistant). This time was also used to build rapport with potential participants and allow them to review and sign the general consent form for the study. Once a large enough group of participants (generally 2 to 3) had gone through the initial meeting, I scheduled an orientation group session to be held with the group. Originally, this was intended to be only one session including all participants in the study. However, because of timing and the previously discussed issues with recruitment, this session ended up being split into three separate sessions involving groups of 2 to 3 participants. These sessions took place over a period between November 2010 and June 2011.

During these sessions the purpose, aims, and methods of the study were described, including an in-depth description of the Photovoice piece of the research. These sessions were also used to further build rapport between participants and me, as well as among the group, which was useful during individual interviews and at later stages of the project. Conversation during these meetings was generally informal and was recorded using a digital recorder, then later transcribed and analyzed so that the themes and ideas expressed were available to help guide the individual interview process. Participants were asked for their feedback on the study goals as they were presented in this session and provided their input and suggestions as to what they would like to gain from this research. They were also asked to discuss any additional considerations that they thought the research (and particularly the later stages of the research)

should take into account and, if feasible, incorporate. The discussion and responses from these sessions are included in the Results and Discussion portion of this thesis.

During these sessions, participants were also asked several general questions about being queer at the University of Saskatchewan. These questions specifically focused on participants' general experiences with and feelings regarding the “queer community” at the U of S, their level of familiarity with the Positive Space Program and the USSU Pride Centre, their feelings about and opinions of the Pride Centre, their reasons for being interested in the research, and the ways that they thought life for queer students might be improved (through this research and otherwise).

At the end of this session, participants were provided with single-use disposable cameras and a hand-out with instructions for the Photovoice portion of the project. I also showed the participants examples of some photos from the *Looking Out/Looking In: Women, Poverty, and Public Policy* Photovoice project conducted by the Prairie Women's Health Centre of Excellence (2006). This project took place within Saskatoon and focused on women's experiences with poverty and contained several photos related to place. I decided to provide these examples so that participants would have a better idea as to how this method had been utilized in other projects. Afterwards, participants were able to ask questions, request clarification, and voice any concerns they had about this portion of the project. I also made it clear at this time that participants could contact me via email or telephone if they had any questions or concerns once the meeting was over.

Three out of the seven participants that attended these meetings chose not to take a disposable camera, opting instead to use their own digital or phone cameras for their portion of the project. For participants who chose to use their own cameras or cell phones, I discussed

photo ownership and use within the context of the study and offered to provide printed copies of the pictures, should they be interested. None of the participants who submitted digital photos were interested in receiving hard copies of their photos. Participants who used disposable cameras all received printed copies of their photos.

This stage of the study served several purposes. First, it identified the sub-set of the queer student population that would be participating in the study group. Secondly, it provided some insight into individual and group experiences. Lastly, it addressed the first research objective of the study and challenged the sexual activity-centric view of queer self-identity. It did this by addressing the following research questions associated with this objective:

- How do young people within the queer community on the U of S campus define their identities?
- How do young people within the queer community define a healthy queer identity?

These questions and the resulting group discussion based around them focused on individual identity and the overall experience of queer students at the U of S, as opposed to sexual activity and desire, as has been the tendency of other research in this area.

4.4 Photovoice

The next step in this research was the participant Photovoice project. This particular piece of the research took place over the course of November 2010 to August 2011. Participants were initially given 2 to 3 weeks to complete and submit their pictures, but due to a variety of real life circumstances and obligations, most took between 4 to 8 weeks to finish this part of the project. During this time, the participants were asked to photograph spaces throughout the campus and the broader community that were important to them as individuals and that they felt affected their lives as queer students, either positively or negatively. I indicated to participants that the spaces that they photographed should be ones that they considered to be safe, meaning that they felt comfortable being and expressing themselves within these spaces. This definition of safe space was intentionally left somewhat vague in an effort to not overly influence which spaces participants chose to photograph and to allow them to define what did and did not constitute a safe space according to their own criteria. The definition itself was expanded upon somewhat through group discussion and reflection during the orientation sessions.

Participants were asked to take a minimum of 10 photos of spaces that fit these criteria, either using the disposable camera that they were provided at the orientation session or their own digital or phone camera. They were told at the orientation session that they could use any remaining photos on their disposable cameras either to take additional photos that addressed the Photovoice assignment or for personal use. The five participants who finished this portion of the study submitted 10 to 39 photos each. These photos were of a variety of locations around campus and throughout Saskatoon and are discussed in further detail in the results and discussion section of this thesis.

Disposable cameras were processed once they were turned in by participants, and double prints of each photo and a digital photo CD were made. Digital photos were submitted to me by participants either through email or, in one case, on an image CD. I then had prints made of each photo for data analysis and interview purposes. Each participant that used a disposable camera was given a set of prints of their images at the conclusion of the individual interview. Since participants who used a digital or phone camera already possessed a digital copy of those images, they were only given printed copies at their request.

This portion of the study was intended to address the third objective of this research, or understanding how self-identified queer students on the U of S campus determined spaces as "safe." The goal of the Photovoice piece was to have participants take photographs that represented how they negotiated and experienced space throughout their daily lives. These pictures and the subsequent discussion with participants in the individual interviews and group sessions provided me with both visual representations of safe spaces and also information regarding the criteria that participants used to label these spaces as "safe." The photos also provided a starting point for further, in-depth discussion about participants' use of space and how this use of space influenced their lives, both as queer students and as individuals. The bulk of this discussion took place in the individual interviews, during which the participants' photos played a large role.

4.5 Individual Interviews

The next step in the research was a one-on-one interview with each of the participants. These interviews were conducted after I had adequate time to process and analyze the photos and were scheduled according to participant availability. They were used to gather information from participants about their backgrounds and experiences as self-identified queer students at the U of S, to select 3 to 5 photos for use in the larger project, and to discuss these photos in further detail. Interviews were semi-structured and based around the SHOWeD technique, a structured framework for photo selection and guided dialogue developed by Wang specifically for use in Photovoice projects (Palibroda et al., 2009; Wang, 1999). This technique was designed to guide both participant and researcher through the photo selection process by encouraging discussion, inspiring critical analysis, and teasing out some of the deeper meanings and themes underlying the images and participants' selection choices. It does this through the use of five key guiding questions:

- What do we **S**ee here?;
- What is really **H**appening here?;
- How does this relate to **O**ur lives?;
- Why does this situation, concern or strength **E**xist?; and
- What can we **D**o about it (i.e. the situation, topic of concern or strength)? (Wang, 1999, p. 188)

An interview guide was used to help guide these sessions (see Appendix H). Questions included in the guide were formulated based on the SHOWeD methodology and were edited

based on discussion with participants during the orientation session and, at times, individual interviews with other participants. The interview contained four main sections, including a warm-up or rapport building section, a section dedicated specifically to participant background, a section covering general study-related questions, and a final section dedicated specifically to the SHOWeD methodology, during which we discussed individual photographs.

It is important to note that, while this guide was crucial in directing the flow of the interview and conversation and the same general structure was followed in all of the interviews, the interview structure also remained flexible, and certain lines of questioning or discussion were often expanded upon or new lines of inquiry were opened up based on what the participants themselves seemed interested in discussing. For instance, some participants spoke at length about their personal background, while others preferred to provide fewer details about their past. There were also some instances where specific questions were skipped, as the information had already been covered in other portions of the interview.

Interviews were conducted in a private study room at the Murray Library on the University of Saskatchewan campus, with the exception of one interview, which was conducted at a local coffee shop at the request of the participant. The library location was chosen because it was easily accessible, provided an adequate amount of privacy, and there were few things to distract from the discussion or interfere with recording. It also had suitable space to allow for displaying photos, which was an important part of the interview process.

Almost all interviews were recorded using a digital recorder and were later transcribed and analyzed. There was, however, one exception to this, as the interview with Derek could not

be recorded due to technical issues with the digital recorder. Instead, I took extensive, detailed notes during the interview and used these when analyzing the data.

Information gathered in these sessions helped to determine how participants made sense of and negotiated space throughout campus, and the analysis of these data was used to address the second research objective of this study: namely, understanding how place influences the health of self-identified queer students on the U of S campus. This was done by using the interview guide and the participants' photo choices to focus the discussion within these interviews on topics related to the research questions associated with this objective, including how the presence of "safe" spaces on campus contributes to overall well-being of queer students and the influence that these spaces have on the health of queer students.

4.6 Data Analysis and Final Stages

Several different qualitative techniques and tools were utilized to analyze the final data from this project. This analysis was on-going throughout the course of the project and was adjusted as needed. Below is an overview of the main methods of data analysis used throughout the various phases of the study.

4.6.1 Photo Analysis

The methods used to analyze the photos taken as part of the Photovoice portion of this project were developed based on discussion with my committee members and information found in the literature (McElroy, 2003; Pink, 2001; Richards & Morse, 2007; Wang, 1999). Pictures were analyzed first by individual participant and later by group. For the individual participant picture analysis, all of the photographs taken by a participant were viewed and analyzed, separate from the photographs of other participants. Individual photo analysis was performed twice, once before and once after each individual participant's interview. After the individual analyses had been completed for all participants, photographs from all participants were combined into one data set for a group photo analysis. This group analysis was performed once.

The individual analysis was conducted after each participant completed the Photovoice portion of the research. Once I received photographs from participants, printed copies were made of all photographs to be used for analysis. Each photograph was then labelled with an identifier specific to the participant, as well as a number. These labels were used during analysis to track each picture. Pictures were then analyzed in several different ways. First, I looked through all the photographs in the group twice and recorded my initial impressions. These impression included observations of basic content, composition, and the overall "feel" of the pictures as a group. Next, I took a closer look at the pictures as a group. To do this, I laid pictures out and

reviewed them more closely, then noted basic themes and common details. Following this, I reviewed each photo individually and recorded details and observations, including orientation of the photo, composition, colors, themes, lighting, and the objects and locations pictured. I also noted the overall feel that each picture invoked and occasionally noted elements that were not included in the image, such as photographs of buildings where the entrance was blocked or not pictured. Finally, I sorted pictures into groups according to common themes found in the pictures and noted the numbers of pictures included in these groups. Themes were based on categories such as orientation, lighting, composition, content, color, location, and use. These themes were then used, along with the previous picture analyses, to formulate a short list of questions and observations to be used as part of the future participant interviews.

The second individual analysis took place after individual participant interviews. After I interviewed a participant, I then re-analyzed their pictures using the knowledge gained from these interviews. This analysis was similar to the first in that it involved reviewing pictures and recording overall impressions and in-depth individual picture analyses.

The group analysis of pictures took place once recruitment, Photovoice, and individual interviews were completed for all participants. For this analysis, photographs from all participants were reviewed and initial observations and impressions were recorded. Once these were recorded, photographs were laid out and reviewed for similarity in content and theme. Finally, pictures were sorted into thematic groups. This process was similar to the one done during the first individual analysis, except pictures were compared and grouped across participants rather than by individual participant.

4.6.2 Interview Transcription & Analysis

In addition to photographs, group discussions and individual interviews were also analyzed. The three introductory group sessions and four out of five individual group interviews were all digitally recorded. I transcribed the audio files from these sessions using Microsoft Word and Express Scribe software. Participant names and identifying information were all replaced with anonymous identifiers within the transcripts. Once completed, I reviewed all transcripts and made note of common themes, comments, and observations.

These observations were used in tandem with the photograph analyses to address the research objectives and questions of the study. The findings are broken down into five main categories and are outlined in the results and discussion section of this thesis.

4.7 Study Context

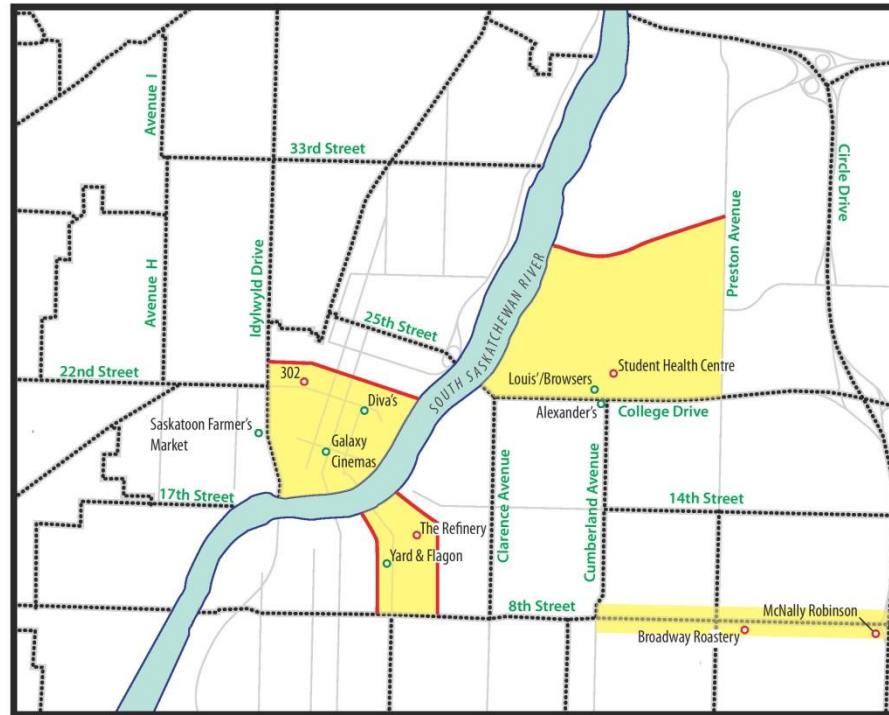


Figure 4.1: Saskatoon Boundary Map: Selected Safe Spaces

Given the importance of place within this study and the amount of time spent discussing various locations on the University of Saskatchewan campus and throughout the city of Saskatoon, it is necessary to provide some context for those readers who may be unfamiliar with the city. Saskatoon is a city located in the southern half of the province of Saskatchewan, in the region of western Canada known as the Prairies. It is the province's largest population centre and home to roughly 21% of the province's overall population (Statistics Canada, 2012). The city is divided by the South Saskatchewan River and comprised of an east and a west side, as well as several different areas and neighbourhoods. The University has several on and off-campus dormitories, but the majority of students live in apartments, condos, or houses located elsewhere

in the city. Because of this, many students commute to and from the university every day. The majority of travel within the city takes place via personal car, truck, or van, but a number of students walk, bike, or make use of the city's bus system (City of Saskatoon, 2010). The location of the university makes nearby neighbourhoods and areas, such as the downtown area and the Broadway district, more easily accessible for most students. The majority of the areas and locations discussed within this thesis are areas near the University of Saskatchewan campus.

Participants discussed several specific locations within the city, and references to some of these locations will be made in the results and discussion section of this thesis. A brief overview of these places, including their location within the city, their specific uses, and any relevant history follows:

8th Street

8th Street is one of the main streets in Saskatoon and home to several restaurants, fast food establishments, coffee shops, grocery stores, big box stores, and one of Saskatoon's three malls. It is located along several of the city's bus routes and many U of S students live in the surrounding residential areas and work and shop at its businesses.

302

302 is the newer of Saskatoon's two gay bars, opened in 2010. It is housed in a former warehouse located on Pacific Avenue, in the city's downtown area. There are several other bars and nightclubs within walking distance, including Jack's, a bar with a rougher reputation, which is located upstairs in the same building.

Alexander's

Alexander's is a restaurant located on Cumberland Avenue, across the street from the edge of the University of Saskatchewan campus and near a neighbourhood that houses a large number of University students. Because of its proximity to campus, Alexander's is often used as a meeting place for students and other members of the university community, and thus caters to significant number of student customers.

The Broadway District

The Broadway District is one of the main business districts within Saskatoon, located along Broadway Avenue between 8th Street and the South Saskatchewan River. This district is home to several popular bars, clubs, and locally owned businesses and is bordered by residential neighbourhoods that are home to many students. It is situated along several routes and within walking distance of the university campus.

Broadway Roastery

The Broadway Roastery is a locally-owned coffee shop with two locations in Saskatoon. The first location is on 8th Street, close to several apartment complexes where a high number of students live, and the second location is in the Broadway district, within walking distance of campus.

Browser's

Browser's is a consignment bookstore and coffee shop located on the second floor of the University of Saskatchewan Memorial Union Building. It is run by the University of Saskatchewan Students' Union and provides students with a place to re-sell their books on

consignment. It is a popular study and meeting spot for students and other members of the university community, given its central location on campus.

Diva's

Diva's is Saskatoon's first and longest-running gay bar, originally opened in 1980. It is located off of 3rd Avenue, on the opposite side of the downtown area from 302. The club is housed in a building with an alleyway entrance, and it hosts a variety of queer-themed events, including drag shows, throughout the year.

Galaxy Cinema

The Galaxy Cinema is the largest and newest of Saskatoon's movie theatres. It is located on the corner of 20th Street and 2nd Avenue, at the edge of the downtown district.

Louis'

Louis' is a pub located in the basement of the Memorial Union Building on the University of Saskatchewan campus. It is run by the University of Saskatchewan Students' Union and hosts a number of events in the evenings, including concerts, trivia nights, and variety shows. It is a popular night spot for many students because of these events and its central location on campus. Members of the campus community also use it during the day as a lunch spot.

McNally Robinson

McNally Robinson is an independent bookstore located on 8th Street. It is the city's largest independent bookstore, with a building that has two levels and houses a small café. There are a variety of community events held within the store each month.

The Mendel Art Gallery

The Mendel Art Gallery is an art gallery located along Spadina Crescent, situated between the University of Saskatchewan campus and downtown Saskatoon. It is open daily and houses art displays, a coffee shop, and a conservatory.

The Refinery

The Refinery Arts & Spirit Centre is an arts centre located in the Broadway District. It is attached to St. James Anglican Church and contains theatre space where theatre productions and classes on a variety of subjects ranging from yoga to sewing.

Saskatoon Farmer's Market

The Saskatoon Farmer's Market is the main Farmer's Market for Saskatoon, located in the recently developed River Landing. It is permanently housed in a building with a courtyard area and remains open year-round, with reduced hours during the winter. The surrounding area is part of the city's core neighbourhoods and the Market itself can be difficult to access for those who do not own a car or live within walking or biking distance.

Student Health Centre

The Student Health Centre is a health centre that offers non-urgent medical care to current U of S students and their family members. It is located on campus and was moved to the fourth floor of the Place Riel building in 2012. However, all references to the health centre within this research refer to its former location in Saskatchewan Hall.

USSU Pride Centre

The USSU Pride Center is a centre run by the University of Saskatchewan Students' Union, dedicated to queer student issues. It is housed in a physical location on campus, which is intended as a drop-in space and meeting place for queer undergraduate students and allies. This space is also used to host the majority of the centre's weekly events. The centre's current physical location is on the first floor of the Memorial Union Building, but references to its physical location by participants will refer to its former location in the lower-level of the Memorial Union Building.

The Yard & Flagon

The Yard & Flagon is a pub located in the Broadway District. It is located within walking distance of campus and several residential neighbourhoods where many of the university's students live, and it is a popular location among students.

5.0 RESULTS & DISCUSSION

My analysis of participant photographs and interviews provided a wealth of information that allowed me to explore various aspects of safe spaces and queer identity, many of which have not been previously addressed in research. In particular, I was able to compile a list of potential safe spaces in Saskatoon, as well as to develop a basic idea of some of the elements that factored into the labelling of a space as safe versus unsafe for this particular group of queer students. While this list and these elements are not universal to all queer students at the U of S or in general, the insight that they yield into the process that individuals use to mentally label space and the subsequent ways in which this labelling influences use of space and, on a broader level, reflects individual and group identity, raises some important questions and provides a foundation for future research.

Rather than dividing the discussion of the study data and findings according to each individual research objective, I have instead chosen to separate it into five individual sub-sections, each of which focuses on a different theme found within the research. These sections discuss the findings within the data and how they apply to specific research questions and objectives. I decided on the order and structure of these sections based on their relationship to one another and the logical flow of ideas between them. These sections are meant to build upon one another and provide a detailed picture of the data and themes discussed by participants. This looser structure is also reflective of the methods used for data collection and analysis and is meant to allow for easier inclusion of participant photographs within the main text.

A brief summary of these five thematic sub-sections is as follows: Identifying and Negotiating Safe Spaces, in which I review the general criteria that participants used to identify

and discuss safe spaces; Safe Spaces in Saskatoon, in which I discuss specific places named as safe spaces by participants, including a general and a more detailed listing of these places broken down by type, location, use of space, and conditions of safety; Queer Identity: More Than Just Sex, in which I discuss queer identity, how this relates to participant interviews and pictures, and how this all reflects upon the tendency in some research to equate queer identity with sexual behaviour; Identity: The Sum of Many Parts, in which I discuss the role that participants' queer identity played in their use, choice, labelling, and discussion of safe spaces; and Safe Spaces and Health, in which I analyze the ways that safe spaces might influence queer student health and the relationship of health to this project. Taken together, the discussion provides insight into the experiences of my participants and their use of space, while also raising further questions and providing the seeds for future research.

5.1 Identifying and Negotiating Safe Spaces

One of the first things that became readily apparent after reviewing the data was the presence of a specific, often subconscious set of criteria that participants used to determine whether spaces were "safe." It is unsurprising that this was one of the first things to stand out, given the goals and objectives of this research and its focus on trying to determine precisely how queer students at the U of S label and negotiate safe spaces. It was also not completely surprising that there were some shared criteria that participants used to label spaces. While there are natural differences between the daily lives and experiences of participants, they also share a number of similarities, and it was some of these similarities that influenced the ways in which they labelled space. Since the participants are all students at the same university and live in the same mid-sized city, it is logical that they would utilize some of the same spaces, and that some of those spaces would share common elements and characteristics.

More unexpected, though, was the emphasis that participants all placed on the importance of non-physical, often intangible elements of the places that they photographed and discussed, and also which of these particular elements seemed to receive the most emphasis. Namely, many of the elements that were most emphasized were not exclusively tied to queer identity, but instead seemed more closely related to participants' identities as a whole. While queerness and how it might be received and treated in a specific place was most certainly an important factor in the decision to label a space "safe," it was not always the primary or even secondary deciding factor in doing so. Often times, other aspects of participants' individual identities, such as age, personal experience, religion, politics, and even personal hobbies and interests, played a more immediate role in their decisions. The list of common elements of safe spaces found within the data reflects this.

It is important to note that, while most participants had heard the term “safe space” before participating in this research, the majority only had a vague idea as to what the concept actually involved beyond displaying Positive Space signage. For this reason, during the initial group meetings I made a point to discuss the concept of safe spaces with participants, but was careful not to provide an overly specific or restrictive definition of safe spaces, so as not to over-influence the spaces that participants chose to photograph. As a result, the concept of a safe space that each participant built was based partially on their own personal definition and conception of the term. That is not to say that this would not have been the case had I provided a more definitive definition, but I do believe that this allowed participants a bit more freedom in their understanding of what constituted a safe space and their labelling of such spaces. The resulting photographs and discussion reflect participants' individual personalities, views, and experiences. At the same time, these photographs also share certain noticeable similarities, suggesting that perception and negotiation of safe spaces can be both a shared, group experience and a highly individualized one.

The first and one of the most interesting common elements of safe spaces found between participants was the importance of the other people who occupied or made regular use of a place. Despite the lack of people included in photos, primarily because of ethical concerns on the part of participants, all of the participants at some point mentioned the influence that the people who occupied a place or, in some cases, the people that they associated with a place, had on their opinion of that particular place and whether or not it was “safe.” The second common element of safe spaces was the degree of familiarity that participants had with a place. This familiarity was related to both how often an individual utilized a particular place and the reason(s) that they utilized that place. Places that were associated with more “intimate” parts of their lives, such as

family, friends, home life, and even work, tended to be more likely to be considered safe. The next shared element among participant safe spaces was the “feel” or “vibe” of a particular place. This in particular demonstrates that the intangible, abstract elements of a place were often more important to participants than the physical layout and attributes of that place. This demonstrates the importance of an individual’s emotional connection and reaction to a place. Those places that participants could connect with on a more personal, emotional level were more likely to be the ones that participants labelled as safe.

My next finding was that a particular place did not have to be labelled as a Positive or safe space or even be specified as a “queer” space to be considered safe. There were instances where being labelled as queer-specific or as a Positive Space did work somewhat to a place’s advantage, but it was not, for the most part, the deciding factor. In certain cases, being labelled as queer even seemed to work against certain places. Given the emphasis in much of the literature regarding queer identity and use of space on queer-specific spaces, this observation is especially interesting, and suggests that there is a need to expand the focus of the current research into sexuality, gender identity, and place. My final finding is that many safe spaces are only conditionally safe and are not necessarily entirely free of “unsafe” activity. For some participants, their familiarity with a place and the associations that they had with that place outweighed any activity or other elements that outsiders might consider “unsafe.”

Perhaps one of the most significant findings within this research was that most of the elements that participants used to label specific places as safe were loose guidelines rather than strict rules. There was no one, definitive quality of a place that would automatically place it in the category of “safe,” and certain qualities became more or less important within different places. However, as the discussion here and in the following section regarding specific safe

spaces will show, the safe spaces discussed in this project contained a combination of one or more of the elements listed above.

5.1.1 People as Safe Spaces



“That’s consistently the thing, I think, that was, for me—it’s not about the space, it’s about the people who are there.”

Figure 5.1.: McNally Robinson – Photo by Danny

Safe spaces, as I discussed in the background and literature section, consist of both place (i.e. physical spaces) and space (i.e. a broad, loosely defined area) (Agnew, 2011; Tuan, 1977). As such, they can be both “narrow” in that they are generally associated with a specific location, and “broad,” in that the borders of that location are not necessarily fixed. Safe spaces are often dependent upon a physical, geographic location, but that location is not all that they are. While the physical location can be important and provides a focal point for these spaces, it is often what happens within physical places that provides them with much of their meaning. Safe spaces are about context and as with most places, this context includes the daily lived experiences and

actions of individuals (Kearns & Joseph, 1993). Safe spaces, therefore, are as much about the people who occupy and make use of those spaces as the physical locations that they occupy.

Keeping this in mind, it is perhaps not entirely surprising that participants used people as one of the defining factors of a safe space. The people associated with a particular place were often one of the first points that participants mentioned when discussing safe spaces, and in some cases, this was one of the most influential factors in a participant's decision to label a place as safe. When asked what constituted a safe space, Danny said, "I think a large part of it is about the community, you know. Who's there. I think more so than the space itself. And what kind of crowd it attracts. I think that is the general measure." This sentiment was one that was echoed by most of the participants. The people who occupied a place could "make or break" it and determine whether or not it qualified as safe. Some places that one would assume would be safe, such as the Pride Centre, were not ones that participants included among their lists of safe spaces, in part because of the people that were associated with them. When asked about the Pride Centre in one of the group orientation sessions, Danny commented, "I've heard...that it tends to be kind of cliquy and that's almost a crowd that hangs out there and that, you know, I don't think that I'd feel comfortable." Lydia also mentioned that the people she associated with the space were more "politically-minded" and that she did not consider herself to be part of the group. Because of the people who made use of the space, or who were perceived as making use of the space, some saw the space as non-inclusive.

The relationship between space and people that participants spoke of was multi-faceted and involved several different ways in which people could be associated with a particular place and thus influence their opinions of that place. The first, and perhaps most obvious, of these

associations was between space and people who physically occupied a place at the same time that participants chose to utilize that place. This association was the least permanent and had the least long-term effects on their view of a place and whether or not they considered it a safe space. Since the individuals physically occupying a place changed quite frequently, encountering a person that they found unpleasant in a place might sour that particular experience, but did not necessarily lower their overall opinion of the place in the long term. Rather, the second association that participants seemed to make between people and space, namely, the type of people who made regular use, or were perceived as making regular use of a place, was the one that seemed to have the greatest effect on their view of that place.

The people who regularly used a specific place brought their opinions, views, and attitudes with them. This influenced the overall feel of the place and whether or not participants felt safe using that place and, further, whether they felt safe using that place in certain ways. Most of the participants pointed out the U of S campus as one area within the city that was generally safe and accepting, and much of this was because of its association with students and other people who were seen as having a more "liberal" and open-minded attitude. People with this type of mindset were seen as being more accepting of difference in general and of queerness specifically. When speaking about Browser's, a combination bookstore and coffee shop located on campus in the Memorial Union Building and used primarily by students, Danny said, "[T]he crowd that generally tends to be there is more of an open-minded, liberal kind of crowd. It has that kind of...it has that atmosphere that I would feel being safe there. You know, just because the mindset is generally more liberal. More accepting of queer people, generally." This perceived acceptance was an important factor in the safeness of a place. Students and the mindsets and attitudes associated with them were also associated with the campus, thus making it a generally

safe area. Isaac echoed this sentiment in his interview, saying, "Student life in general is more open and you get to be yourself more....I think students are just much more open." While it can be presumed that there are individuals that are part of the campus community who might not share this "liberal" mindset, the fact that the majority of people on campus, and thus the people that participants associated with campus life, were perceived as sharing this mindset, meant that the overall "attitude" associated with specific places on campus was one of openness, and thus places such as Browsers' were viewed as being generally open as well.

Another important effect that an open mindset seemed to have on a particular place, and perceptions of that place, was individuals' level of comfort with behaving certain ways while making use of that place. When the people associated with a place were seen as being more accepting, participants felt more comfortable speaking about queer issues or behaving in ways that could be seen as "queer," such as showing affection for a same-sex partner. This ability to express themselves added to participants' comfort-levels within a particular space. In one of the group meetings, Jack discussed the effect that the people within a place would have on his behaviour, saying, "[D]epending on the space and the amount of people within that space...your type of actions can be, like, normal kinds of things." Derek went on to add that he would feel comfortable holding another man's hand at the campus pub, Louis', but he would not consider doing the same thing at many places off campus. He also qualified that he would feel more comfortable, even in Louis', if he were with a large group of like-minded friends.

A final way that people influenced participants' opinions and labelling of space was on an individual, personal level. Several of the places that participants considered to be safe were ones that they associated with close friends, family members, or other people that they valued in their personal lives. Participants made a point to mention these personal associations when speaking

about certain safe spaces. Most of the time that Scott spent in 302 was with his best friend, Dylan. Because of this, he associated the club with Dylan, and most of his discussion about it was directly related to their friendship and shared experiences within that space. Scott said that this was a large part of the reason that he felt comfortable there, elaborating, "It's kind of an association I have kind of more with Dylan than, I guess, the actual building." He did note that he enjoyed the general atmosphere of the club and that it was a safe space for queer people in general, so his association of the space with Dylan was not the only reason that he labelled it as safe, but it was the main reason that it held so much personal significance for him. In essence, the space made him think of his friend, which made him feel comfortable on a personal level.

5.1.2 Safe Spaces and Familiarity



"It's probably mostly because, personally...I spend so much time there that it's kind of like a second home."

Figure 5.2.: Student Meeting Space – Photo by Isaac

Another factor that participants used to label space was familiarity. Places that participants were more familiar with were, somewhat understandably, the ones within which they felt most comfortable. The comfort of an individual or group of individuals within a particular place is something that most safe space programs take into consideration. Safe spaces are meant to provide a place that individuals feel comfortable being themselves, free from harassment (Crowley et al., 2007; Draughn et al., 2002; Holley & Steiners, 2005). However, few safe space programs consider the role that familiarity plays in an individual's sense of comfort with a particular place. One thing that became apparent over the course of this research was that participants were more willing to frequent and label as safe spaces in which they felt comfortable. Likewise, they were more likely to feel comfortable in places that they used regularly and with which they were more familiar. The relationship between comfort within a place and frequency of use of that place was often a reciprocal one. Sometimes comfort was a result of frequent use

of a place, sometimes frequent use of a place was the result of an individual's comfort level in the place, and sometimes it was a combination of the two.

Most of the photographs that participants took of spaces on campus, for instance, focused on the buildings that housed their departments, on specific department spaces, on student group spaces, or on places where they volunteered or where they spent a great deal of their time. Lydia took a picture that included the building that housed her department and explained her framing of the photo by saying, "I spend most of my time in [my department space], regardless of what homework I'm doing. Cause it's just where it's at." This particular space was important to Lydia's identity as a student, and so a large portion of her time on campus was spent there. Scott, Derek, and Isaac also spoke of spending the majority of their time in department-specific spaces, and these were the spaces that they decided to photograph. While Isaac and Scott also took pictures of the administration building and a few other general use areas of campus, the focus of most participants was on the aforementioned spaces where they spent the majority of their time. Campus may have been considered generally safe by participants, but the individual spaces that they chose to focus on as safe and many of the spaces that they discussed in greater detail during their individual interviews were ones with which they had a personal connection. Isaac took the most pictures of campus, and the majority of these pictures focused on the building that housed his department, the majority of his classes, and the space for the student group he led. He also took several picture of the place on campus where he had been volunteering for two years. These were the spaces in which he spent most of his time on campus. They were also spaces where a lot of his friends and acquaintances on campus congregated. When he spoke of the room that housed his department's student group, he described it as comfortable and welcoming, but also

admitted that he might have considered it safe "because I just spend so much time there and everybody's so nice."

Many of the spaces that participants photographed, both on and off campus, also reflected aspects of their daily lives, such as school, work, or personal hobbies and interests. While safe spaces were not solely places that participants used frequently, this was still an important element of many of the spaces that participant labelled as safe. Regular use of a specific place meant that participants had more personal experience to draw from, another element that added to their level of comfort. In some cases, regular use of a place and this sense of familiarity made safe spaces out of places that one might assume to be unsafe. One of the spaces that Lydia photographed was the bar that she worked at as a part-time waitress. The bar itself is located in the Broadway District, an area that most participants seemed to agree was a safe area overall, but the bar itself has a tougher reputation. Lydia said that she felt it might have been "a bit of a backwards choice as a safe space," but then went on to qualify her decision to include it based largely on her experiences there. She described the staff and regulars as "family" and also said that she liked the space because "it's the sort of place that almost makes me comfortable because it is like [the city I grew up in] in a way." She admitted that, to an outsider, it would seem like the type of place where people would not be comfortable having a gay man around, but her experience there proved differently, as people had no problem with one of her gay male friends helping her and the rest of the staff clean the bar after hours one evening. "It's surprisingly cool," she said. "You don't expect that."

5.1.3 The “Feel” of a Safe Space

The third element that participants used to determine whether or not a space could be considered safe was the general "feel" of a space. This idea was a rather abstract one, as it involved a participant's perception of and reaction to a particular place. The very nature of safe spaces and the importance of context in the formation of safe spaces meant that different individuals would have different experiences and reactions to a place. Physical location, lived experience, and individual action combined to form the place and also influenced an individual's interaction with that particular space (Kearns & Joseph, 1993). This dependence upon individual experience meant that the "feel" that participants got from a place was often dependent on their personal identity and experience. The feel of a place was also often influenced by the people who occupied that space, that particular participant's familiarity with the place, or some combination of the two. Similarly, the feel of a place could influence a participant's familiarity with that place, since they were less likely to make regular use of a place that had a "bad" feel or that in some way made them uncomfortable.

The feel or atmosphere of a place seemed to rely on a combination of several factors. While these factors were not fixed and varied from person to person and place to place, there were several that were mentioned with some frequency when participants discussed place in general, and safe spaces in particular. In addition to the people associated with a place and an individual's familiarity with that place, these factors also include the intended use or purpose of the place, its physical layout, and the specific time that an individual occupies or makes use of that place. These elements all, to varying degrees, relate to an individual's personal and emotional relationship with a place. The people that one associates with a place and an individual's familiarity with that place can affect the way an individual's level of comfort within

that place and the way they relate to the space overall. This level of comfort can, in turn, have a profound effect on the "feel" of a place. Places that are more comfortable, in general, have a more positive feel. Similarly, the more comfortable a place, the more likely it is that it has a positive atmosphere.

The other two factors that influence the feel of a place are its intended use or purpose and its physical attributes. These factors are also connected to an individual's personal and emotional connection to a place, although in a less direct or obvious way. For many participants, the intended use or purpose of a place could influence whether or not they chose to utilize it. Places intended for certain uses were often viewed as being more open or welcoming and therefore had a better overall atmosphere than others. For instance, coffee shops, pubs, and bookstores generally served as places to relax and spend time with friends. Because of this, they were thought of as calm and relaxing, both qualities that contributed to them having a positive atmosphere. In Danny's case, he included Browser's in his photographs despite admitting to not spending a large amount of time there. One of his primary reasons for doing this was the overall feel that he got from the space, that it was "kind of a meeting place" and "a good place to get together and hang out." Scott photographed the Galaxy Cinema partially because of the intended use of the space, as well. He was a fan of cinema, so he associated movie theatres in general and the Galaxy in particular with positive experiences. He saw theatres as places where people were meant to have fun and, as he put it, "It's an escape, really."

While the physical attributes of a place were often not the main element of a place that participants focused on, they did still have some impact on its safety. Much of this impact was directly related to the atmosphere within a place, which was something that the physical aspects of a space could directly influence. The aesthetic of a place could contribute to its overall feel,

with those places that were more aesthetically pleasing being perceived as having a more positive atmosphere. Cleanliness also played an important role in the overall feel of a place. 302, for instance, was described in one of the group sessions as being "clean." This was spoken of as a positive thing and one of its selling points, especially when compared to other clubs in the city. While the overall feel that participants got from 302 was a combination of various factors, including the fact that the crowd there consisted mainly of university-age individuals and that the club was queer-friendly, its cleanliness contributed to the overall atmosphere by making the space appear more welcoming.

5.1.4 Queer is not Synonymous with Safe

A recurring theme of this research was that a space being "queer" did not automatically mean that it was considered safe. The absence of the USSU Pride Centre from the participants' photographs was perhaps one of the clearest examples of this. The Pride Centre being advertised as a safe space for queer students was not enough for participants to label it as safe. In this case, the other factors that participants used to label spaces as safe or unsafe over-ruled the queerness of the place, and the fact that the space was labelled as "queer" even worked against it in some ways. Participants spoke of the people who used the Pride Centre as coming across as "political" and "cliquey," both qualities that they considered negative. Participants' perceptions of the people who made use of the Pride Centre meant that it did not feel welcoming to participants. While participants all openly identified as queer, they did not consider themselves to be the type of queer individuals who belonged in that particular place. Lydia described the atmosphere within the Pride Centre as "going the opposite direction from being really heteronormative. 'Cause [the people that use it are] like, only people who are proud about being gay." Danny elaborated on this, and said, "It's almost like self-segregating."

This is not to say that the queerness of a particular place was always a deterrent. There were some queer spaces that most participants included in their photographs, such as 302 and Diva's. The difference here may be related to the perceived politicization and level of queerness of these spaces, as neither place was seen as being as strictly political as the Pride Centre, and the crowds within both were thought of as being more diverse than those at the Pride Centre. It is interesting to note, however, that most participants seemed to view 302 in a bit more positive light than Diva's, a view that seems to be at least partially related to each club's perceived queerness. Diva's has been a fixture of the Saskatoon queer community since 1980, whereas 302

is a much more recent addition, having been opened in 2010 (Ruddy, 2010). Because Diva's was Saskatoon's only gay bar for several decades, it became a focal point of Saskatoon's queer community and, as such, is known for hosting queer-themed events. While most participants did not feel that this was a particularly bad thing, it was one of the reasons that they gave for not going to Diva's as often and preferring 302. A number of the queer-related events that Diva's is known for hosting are drag shows or drag pageants, and some participants seemed uninterested in this type of activity. For instance, Isaac said, "I've seen people in drag, but I never, like, specifically just gone out so that I could see a drag show or, you know...It just hasn't been something that I've done yet." Scott felt that the drag shows sometimes worked against Diva's, since "queer or not, Saskatchewan gay people aren't really that interested in drag shows." He explained that he felt Diva's was busier before the opening of 302 because of the lack of other options and said that a friend had told him, "The more you do stuff that is more queer-related, the slower your business is gonna get."

Unlike Diva's, 302 was perceived as being a "straight-friendly gay bar," something of which the bar owners are aware and have even adopted as a slogan on their website. 302 itself was not a space that Lydia chose to photograph, but she still mentioned it in her interview, saying, "I know it's a gay club that's straight-friendly, but it feels like a straight bar that's gay friendly." This perception of the space as not being exclusively or even mostly queer was seen by most as a positive one. Participants did not want to spend their time in a club that focused solely on or emphasized their queerness. Instead, they wanted to spend time in spaces that welcomed and accepted their sexuality and gender identity without focusing on it. As a "straight-friendly gay bar," 302 allowed them just such a place. Participants were free to express their sexuality and gender identity while there, but they were not required to do so. This brand of acceptance

that did not solely emphasize queerness was discussed by several participants and was an element found among several of the spaces photographed.

In the previous examples, participants made distinctions between different types and degrees of queerness associated with a place. If a place catered to an aspect of queerness that participants did not associate with themselves, such as politics, then participants would likely not feel comfortable using that place and would not consider it to be a personal safe space. Participants also made a distinction between the levels of queerness of a place. Places that were seen as either primarily queer or queer to the degree that they emphasized queerness and queer culture first and foremost could be seen as somewhat exclusionary, and thus were sometimes not considered to be safe. The consideration that participants gave to the level of queerness of a place resulted in a subconscious distinction that participants tended to make between queer-only or queer-mostly spaces and spaces that were queer-friendly. A Positive Space advertisement was not, in and of itself, enough to qualify a place as safe, and in cases such as the Pride Centre where the space was already inherently queer, they did not seem to make a difference in the participant's view of the space. However, participants often had more positive views of general public spaces that were not specifically coded as queer if they advertised themselves as Positive Spaces. Danny and Scott both specifically pointed out the Positive Space sign at Turning the Tides Bookstore and indicated that it was part of the reason they had decided to photograph that particular store. Danny also made a point to photograph the Grosvenor Park United Church because it had queer-friendly signage. In his words, "They make a conscious effort to put those kinds of things up, which makes a difference." The fact that non-queer spaces would advertise being queer-friendly seemed to signal that they had a more open mindset and were more accepting, which influenced participants' perception of them. Additionally, general use public

spaces that advertised queer-friendly events, such as Browser's and McNally Robinson's, were perceived as having a similarly positive mindset. These sentiments, in general, would seem to indicate that a space being "queer" is not enough. While designated queer spaces such as the Pride Centre and Diva's are important, these types of places are not necessarily going to appeal to everyone within the queer community. Thus, there is also a need for non-queer spaces that advertise or otherwise show their acceptance of queer individuals.

5.1.5 Conditional Safe Spaces



“It’s—I mean traditionally, you would see this picture and you’d think it’s an unsafe space, right? It’s a dark back alley. It’s kind of like the—it epitomizes unsafe. At the same time... it’s a safe space for queer people because, I mean, everyone else there is the same way.”

Figure 5.3.:Diva’s Nightclub Alley & Entrance – Photo by Danny

One final element of safe spaces that many participants considered important and included in their discussions was the sometimes conditional nature of safety. Safety, and therefore the labelling of spaces as "safe," was not necessarily a permanent condition. Factors such as time of day, a particular group of people occupying a place, other aspects of an individual's identity, and even certain events taking place within a space all influenced safety. This is a point that some of the literature around space has addressed, but it has focused mostly on space in general and not on safe spaces specifically. The general conception and definition of space means that it is, as a rule, something that can change as a result of any of the factors

mentioned above (Agnew, 2011; Tuan, 1977; Kearns, 1993). This is a fact that holds true for queer spaces as well, and one that some research into queer space and geographies of sexualities has addressed. Researchers such as Casey (2004; 2007) and Browne (2007b) have done research into the transitory nature of many queer spaces, including spaces that are temporarily made "queer" by the presence of queer-themed events, such as pride parades, and queer spaces that are made more "straight" through the presence of straight women. While this research does not focus specifically on safe spaces, it seems logical that the generally transitory and conditional nature of space would carry over into safe spaces. Likewise, if factors such as time and people can influence the perceived queerness of a space, then it follows that they could potentially influence a space's perceived safety.

There were several varieties of conditionally safe spaces discussed by participants over the course of this project. First were spaces whose physical appearance or location might make them appear unsafe. A prime example in this category would be Diva's. While the interior of the club was not described as having an unsafe appearance, several participants remarked that the alleyway leading to the outside entrance to the club could appear unsafe to the uninitiated. The entrance is situated in a relatively dark alley that could appear dangerous or uninviting. Danny commented on his photo of Diva's, which was a shot of the alleyway at night, saying, "I mean traditionally, you would see this picture and you'd think it's an unsafe space, right? It's a dark back alley. It's kind of like the—it epitomizes unsafe." He then went on to clarify why the space was actually safe if you understood the context, stating, "[Y]ou know—at the same time it's a safe place for queer people because, I mean, everyone else there's the same way." Those who are familiar with the club understand that the back alley entrance is a hold-over from days when being queer was not as accepted, and keeping the entrance to a gay club hidden gave it an added

element of safety. Conditions or elements that seem unsafe, therefore, can be made safe given the right context.

Another variety of conditionally safe spaces was spaces that were safe only at specific times. One example of this would be 8th Street, and in particular a box store parking lot located along this street. Isaac included one of the box stores along 8th Street among his safe spaces, as it was where he worked, and he considered it to have a safe, welcoming environment. However, he did remark that "[l]ate night on 8th Street kind of gets a little sketchy at times. Uh, we've actually had people get mugged." The fact that he knew that people had been mugged in the parking lot late at night meant that it could be a "little creepy" late in the evening. Isaac considered the space safe in the general sense, but still acknowledged that it could qualify as unsafe depending upon the time. One interesting point about this is that despite the unsafe activity that happened there and the "creepy" feeling that it sometimes gave off, Isaac still felt personally safe within the space, even at the times when he was a bit more on guard for unsafe activity. This may be related to the fact that the muggings that he mentioned were infrequent and that he also had no personal connection to them, since they had not happened to him or anyone close to him.

Isaac's story and his opinions regarding the unsafe activity in the parking lot of his workplace and its affect on the relative safety of the space as a whole was similar to some of the opinions expressed by other participants. Unsafe activity having happened, or even happening on an on-going basis, in a place did not mean that the place itself was permanently marked as unsafe. There were several places that participants spoke of where unsafe activity had occurred, and yet participants still considered them safe overall. In Scott's case, he considered the Internet to be a safe space despite the fact that he experienced cyber-bullying during high school. This bullying

involved threatening emails and was serious enough to warrant a police investigation. In spite of this, he still felt that the Internet was largely a safe space, as it was his primary means of meeting and talking with other queer individuals, and it was also somewhere that he spent a fairly significant amount of his free time. He gave partial credit for this safety to the virtual nature of the Internet, saying, "The way that people have been brought up in this day and age, the Internet was really, really a safe place. Like, it's...you know, I could call someone a horrible nasty name and not have any real repercussions from it. Because that's how secure we are." This was something he contrasted with physical places, in that "it's not much for me to type a really nasty message saying, 'You deserve to die!', but it's a different thing for me to walk up to [someone] and say, 'You deserve to die.'" It is interesting that he made this distinction, considering his own first-hand experience with this type of behaviour. Unlike Isaac, he was not removed from the behaviour in question, but in spite of his negative experiences, he still considered the space to be safe overall. He went on to qualify this, saying, "[I]t's a safe place for me because, like I said, nothing happens in there that I don't want to happen, and when I'm on the Internet, like, I control where I go to and...it's a huge control thing." The ability to control this type of behaviour and put a stop to it, then, meant that the unsafe activity did not affect the overall safety of the space itself.

Another example of a safe space with unsafe activity was provided by Lydia when discussing the bar that she worked at part-time. The bar itself was located in an area of town that was perceived as safe but, as previously mentioned, the bar itself had a troubled reputation. Despite the impression that this reputation might give to some people, Lydia felt safe there, largely because she was familiar with the space and felt comfortable around both her co-workers and many of the bar's regular patrons. However, while the bar was relatively free of fights and physical violence, there was other unsafe activity that happened within the space. In this

particular instance, the unsafe activity took the form of unwanted sexual advances from some of the bar's patrons and occasional unwanted touching, generally directed at female staff members. This was something that Lydia had experienced, and she described it as, "There's creepy men hitting on you and like, they force you to take their number. And like, yeah, I have so little interest in you it's not even funny. And then there's the unwanted back touching, and it's a bar...bars are creepy. That's a problem with bars." Despite having experienced this more than once, Lydia still considered the bar to be a safe space, both because of her familiarity with the space and because of her co-workers, who made a point to intervene in those types of situations. As she said, "Our doormen put the waitresses first, so if I ever feel like someone's making, uh, unwarranted sexual advances, all I have to say is, 'I don't feel comfortable with that guy.' And then if it doesn't stop, the doormen would—they'll deal with that before a fight. So, as much as it is a rougher place, working there, it's impossible not to feel safe." Even though she occasionally had these less-than-desirable experiences, she still felt "really, really well protected" there. Her familiarity with the space and many of the people within and her ability to ask for help and put a stop to unsafe activity transformed what could have been an unsafe place into a safe space. While the circumstances are slightly different, this mirrors Scott's sentiments and shows that familiarity and control in a particular place can outweigh unsafe activity that occurs there. Safe spaces do not necessarily have to be entirely free of unsafe activity so long as individuals feel that they have the right degree of control within that space. This control may involve freedom from certain negative consequences, as in Scott's example, or it may be the ability to put a stop to threatening activity, as in Lydia's example. This only serves to further demonstrate that the way in which people label individual places as safe or unsafe is complex and multi-faceted, and that there are a variety of factors that influence these decisions.

5.2 Safe Spaces in Saskatoon

The data from this study also allowed me to build a list of potential safe spaces within Saskatoon, including a number of places that more than one of the participants photographed. Some of these safe spaces were ones that I had expected to see, while others were more unexpected. There was also a certain degree of overlap among these spaces at a broader level, and after reviewing the pictures and interviewing participants, it was clear that there were specific places, particular areas of the city, and certain types of places that participants had a tendency to consider safe. By discussing this overlap between participant photographs, I can provide a general list of some of the safe spaces and areas in Saskatoon, and also some of the specific types of places that queer students may be more likely to consider safe.

It is important to note that this is not by any means a definitive list of safe spaces or areas within Saskatoon. Instead, it is a partial list specific to the participants in this study and provides insight into some of the possible safe spaces within Saskatoon. This list can be used to generate discussion and broaden awareness around safe spaces for anyone planning work in this area either on campus or within the larger community. These places and areas, while safe for the participants in this study, may not be ones that queer individuals not included in this study would include in a list of safe spaces. This list also has the potential to change or grow, both on an individual and a group basis, according to time, experience, and a variety of other circumstances. It is by no means fixed, and should not be treated as such. However, it can still provide valuable insight into safe spaces within Saskatoon, especially at the broader group and community level.

5.2.1 Common Safe Spaces in Saskatoon

There was some notable overlap between the places that participants photographed for this project. As previously discussed, many of the elements that participants used to label spaces as safe were related to some level of personal connection with a place. The commonly photographed safe spaces within this project generally contain one, if not several, of these elements. Therefore, it might be reasoned that the overlap between participants shows a certain degree of common experience and/or personal connection regarding these shared safe spaces. The type of personal connection does seem to vary between spaces and even among participants who chose to photograph the same place, with the label of “safe space” in some instances relying mostly on the people within a place, while others depended more upon the feel of the place, and still others depended upon participants’ familiarity with a place. There is no one, definitive element that can be used to create a safe space. For this reason, when creating safe spaces for a larger group, the ways in which that particular group might connect with a place on a personal level should be taken into account.

Creating safe spaces for the queer community, then, is not necessarily a simple or straightforward task. The requirements for a safe space might vary between individuals or among different sub-sets of the community. Married, middle-aged queers might connect with a place differently than young adults who are still students, and single, elderly queers might connect in different ways than both groups. As Meyer (2001) was careful to note, the experiences of queer individuals are not universal and are often influenced by other parts of those individuals’ lives that may not be directly connected to their sexuality or gender identity. Factors such as age, race, religion, marital status, occupation, socioeconomic class, and even education can all influence the ways in which queer individuals utilize and connect with a particular place. This is true of

the places mentioned by participants and discussed here. However, while the entirety of the queer community in Saskatoon may not consider these places safe, they are relevant to the city's queer students. As such, these common safe spaces and the factors that participants used to label them as such should be kept in mind for future discussions around queer student life and use of space at the U of S.

The list of common individual safe spaces is relatively short and contains only three primary examples. However, the lists of common safe areas and of safe spaces according to use are much longer. This demonstrates that, while participants may not always utilize the exact same spaces, they do utilize many of the same areas within the city, and they are more likely to consider certain types of businesses, buildings, and general spaces to be safe.

302 and Diva's



"To me, it's just a very safe place where I can be myself and, you know, to quote one of (my friend) Dylan's favorite lines, it's like, 'Whatever, I do what I want.'"

Figure 5.4: 302 Entrance – Photo by Scott

Of the spaces mentioned by participants, there were some that were more "expected" than others. Before beginning this research, the majority of safe spaces that I expected to see photographed were those that had a high degree of relevance to the queer community within Saskatoon, and in particular those spaces that are largely used, or at least are perceived as being used, by queer individuals. These included the USSU Pride Centre, the Avenue Community Centre for Gender and Sexual Diversity, and Saskatoon's two queer-themed nightclubs, 302 and Diva's. Somewhat surprisingly, neither the USSU Pride Centre nor the Avenue Community Centre was photographed by any of my participants. This absence seems to be for a variety of reasons. In the case of the Avenue Community Centre, it caters more to the teenage and high school demographic than to university students. It is also located on 21st street, in an area of town that most of the participants did not seem to use that often, with the exception of the Farmer's

Market. When mentioned in group discussions, many participants were not even aware that the centre existed, let alone where it was physically located.

The USSU Pride Centre faced similar issues. While most of the participants were aware that it existed, many of them had never visited, and some were only vaguely aware of its exact physical location. This lack of awareness seemed to be a combination of participant disinterest in the services that the Pride Centre offered, along with participants' belief that they did not fit within the centre's target demographic. In addition to this, participants did not feel as if they needed services such as the drop-in counselling and peer groups provided by either, so they did not feel the need to use these spaces. In the case of the USSU Pride Centre, there was also a lack of any sort of personal connection that participants felt with the physical location or the people who made regular use of the centre's services. Participants also expressed a dislike for the overall atmosphere within the centre, noting that it was too "cliquey" or "political" for their tastes. This seemed to be one of the primary reasons for not photographing this space, since many participants expressed that they did not feel comfortable with its "vibe."

The absence of the USSU Pride Centre, in particular, is rather interesting, since three out of the five participants photographed either 302 or Diva's, and those participants who did not photograph these places still mentioned them at different points during their interviews. Most participants indicated that they did not use these spaces often, but that they still wanted to include them because they felt that they were important to queer life in Saskatoon. Diva's has been a fixture of the Saskatoon queer community since it first opened its doors in 1980 (Richards, 2005). Originally called After Midnight and later Numbers, Diva's was Saskatoon's first commercial gay club. Aside from another, very short-lived club in 2004, Diva's continued to be Saskatoon's only gay club until 302 opened its doors in 2010 (Ruddy, 2010). Because of this,

Diva's has been the first, and often primary, exposure to queer life and culture for many queer individuals in Saskatoon. This was especially true for those who started exploring their sexuality prior to 2010.

This may explain why participants tended to include Diva's and 302 in their photographs while excluding the Pride Centre and the Avenue Community Centre. For several decades,



*Figure 5.5.: Diva's Sign
Photo by Derek*

Diva's was one of very few places that catered specifically to queer individuals in Saskatoon, and as a result became, for many, synonymous with the Saskatoon queer community. Going to Diva's was a rite of passage, especially in decades past, when there was less acceptance of non-heteronormative people and behaviour in other public spaces. This is something that has begun to change with the gradual shift in attitudes regarding sexual and gender minorities and the increased visibility of the queer

community, but despite this, it seems that Saskatoon's gay bars and nightclubs are still important parts of queer life in the city, even to those who use them infrequently. Danny summed up the general sentiment regarding these spaces when he said, "You know what, let's face it—the bars are really the centers of the community whether you like it or not." It may be that 302 and Diva's are an inherent part of the queer community and were photographed by participants because they reach out to larger portions of the queer community.

Since both Diva's and 302, in theory, target the overall queer community and not just teens or university students, they have a more inclusive atmosphere that appealed to participants who were already out in the community and not in need of the more specialized services offered by the centres. Participants were able to be open and explore their queerness there, but given the mixed crowds and nature of bars in general, they did not have to focus solely on said queerness within either space. Participants were not required to act queer, but if they did act in ways that might reflect their queerness, it was allowed. This allowance for and acceptance of queerness, then, made it a bit easier for participants to relax and enjoy the time that they spent in both clubs. As Isaac said:



*Figure 5.6: 302 Entrance
Photo by Derek*

Everybody just wants to have fun. It's a bit different in straight bars. Straight bars you have to, like, check out this girl and you don't wanna look too goofy or anything. Or, you know, gotta be all manly, so like, turn a chick on or whatever. But um, gay bars everyone just does whatever.

Saskatoon Farmer's Market



"I can't imagine, unless you're a small child separated from your mom, feeling separate and alone at a Farmer's Market. They're not... they're just friendly places."

Figure 5.7.: Heirloom Tomatoes – Photo by Lydia

While spaces like Diva's and 302 were "expected" safe spaces, there were also several spaces that participants photographed and discussed that I did not expect to see before this research began. One of the most surprising of these to me, personally, was the Saskatoon Farmer's Market. I was not under the impression that this space was particularly unsafe, but it was also not a place that I thought the majority of participants would include among their list of safe spaces. This is probably at least partially due to my own biases, as I live in an area of the city that makes the Farmer's Market less than easily accessible, and the only



*Figure 5.8 : Farmer's Market Pavilion
Photo by Danny*

time that I have made use of this space is when asked to go there with friends. More surprising than the fact that the Farmer's Market was photographed, perhaps, was the fact that it was one of

the most frequently photographed locations, with three out of five participants including it as part of their Photovoice project.

The Saskatoon Farmer's Market was founded in 1975 with the goal of providing a market for local farmers to sell their goods and giving local residents increased access to local produce (Saskatoon Farmer's Market, 2011). It was moved to its current, permanent location at the Saskatoon River Landing in 2007. The current location, along with the other developments that



*Figure 5.9: Farmer's Market Sign
Photo by Derek*

comprise the River Landing, are part of current efforts to revitalize Saskatoon's core neighbourhoods. It is open to the public and the main "requirements" for using the space seem to be an interest in local food, the means to travel to its physical location, and the ability to afford the wares, as prices tend to be higher than supermarket retail. This loose set of restrictions on who makes use of the space and the fact that an interest in food is one that has the ability

to span various demographics and backgrounds, leads to the Farmer's Market attracting a somewhat diverse crowd. This diversity and the overall feel of the space, described as "open," "friendly," and "welcoming," were reasons that participants gave for labelling it as safe. Participants also emphasized that the Farmer's Market was welcoming because certain aspects of their individual identity, such as sexuality and gender identity, were unimportant to their use of the space. What mattered, instead, was their interest in buying, selling, or eating food. Lydia, in particular, considered this one of the major elements that contributed to the safety of the space. As she put it:

If you're in a Farmer's Market, you're interested in supporting local people. Does not matter who they are. At all. But you do know that they're local. Usually. Mostly. And that they care about what they're doing. That's the big thing. They care about their tomatoes. They don't care about you. They do care that you'll like the tomatoes. That's nice.

The fact that the Farmer's Market did not emphasize sexuality or gender identity actually made it more inclusive for some of the participants, and warranted its inclusion in their safe space lists.

5.2.2 Safe Areas

Participant photos and interviews provided insight into not only specific safe spaces, but also into a broader array of safe areas and neighbourhoods within Saskatoon. It was fairly common for participants to photograph different parts of the same neighbourhood or area. When discussing these photographs, participants often made reference to more than just the specific building, object, or place contained within the picture and went on to discuss the broader area or neighbourhood as a whole. This would seem to indicate that safe spaces are not always limited to a particular building or place, but that larger, more general areas can function as large-scale safe spaces, or safe areas. The individual buildings, businesses, and other places found within these safe areas may be considered safe partially because they are a part of a larger safe area.

The choice of particular areas and neighbourhoods, like the choice of individual safe spaces, was influenced by a variety of factors, including the size of Saskatoon as a city, proximity of these areas to campus, general perceptions of these areas and their "vibe," the people who made regular use of these areas, participants' familiarity with these areas, and even the general purpose of these areas and their businesses. The primary areas of Saskatoon that participants considered "safe" were the University of Saskatchewan campus and the Broadway District. Most participants photographed and/or discussed these areas and labelled different places within them as safe. These areas are, notably, ones with which U of S students are generally familiar and that they use frequently. The fact that participants included these areas in their Photovoice submissions may have as much to do with their being students as it has to do with their sexuality or gender identity. This further supports the idea that participants' queerness was not the only part of their identities that influenced their labelling of safe spaces.

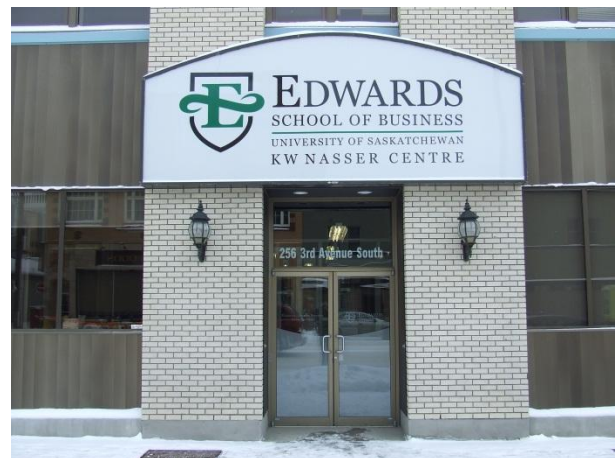
University of Saskatchewan Campus



“Campus is just kind of, we’ve talked about, a safe place.”

Figure 5.10: The U of S Bowl – Photo by Lydia

The first and most frequently photographed safe area was the University of Saskatchewan campus. The fact that a university student was running this research project and that I mentioned photographing spaces on campus when discussing the Photovoice piece with participants may have influenced this. However, I do not believe that this is the main reason that participants chose to photograph parts of the campus community. The participants all being current students and the resultant amount of time that they spent on campus either attending classes, studying, working, volunteering, or participating in student groups more than likely influenced their decision to include parts of campus in their photographs. It would have been more than a little worrying, in fact, had they taken no pictures of campus. Most of the



*Figure 5.11: KW Nasser Center
Photo by Derek*

participants expressed the opinion that campus, in general, was fairly accepting. While feelings on the level of acceptance of queerness throughout Saskatoon as a whole were varied between participants, they all tended to agree that campus was an area in which they felt relatively safe and free to express themselves. For some, like Danny, the university campus ranked among the safest places in Saskatoon, since “finding supportive places outside of the university isn’t the easiest thing.” Some of the other participants, such as Lydia, Scott, and Isaac, felt that Saskatoon



*Figure 5.12: John Mitchell Building Sign
Photo by Scott*

was generally pretty “diverse” for a city in the Prairies, even if it was not completely free of bigotry. But even for these participants, campus was considered one of the safest places in Saskatoon, where queer individuals could behave in ways that might not be acceptable in other, less safe areas. When discussing acceptable behaviour on campus in one of the

initial group sessions, Derek commented that he would feel comfortable holding hands with another man in Louis’ since, “I think people would just be like, ‘Hm... whatever,’” but he “wouldn’t go [off campus] to Alexander’s and do that.” This is an interesting distinction and demonstrates the importance of the campus boundaries in terms of participants’ ability to fully express their queerness, given that Alexander’s is located directly across the street from campus. Even locations such as this, that are close to campus but not part of campus itself, are slightly less safe because they are outside those boundaries. Isaac expressed a similar sentiment in his individual interview, saying that, “I bet you in the university two guys could probably hold hands walking down the campus and not really have to worry about it... I think on campus it’s pretty

safe.” There were a few other places that participants stated they would feel safe showing affection for a same sex partner or had seen others showing this type of affection, such as Broadway and some of the city's malls, but most seemed to think that campus was still an exception in this regard.

Despite the general agreement between participants that campus was a safe area within the city, some also commented that certain parts of campus were more welcoming, and therefore safer, than others. The Pride Centre, as previously discussed, was not included among the list of individual safe spaces on campus. For most participants, the Pride Centre seemed to exist in a grey area. Participants did not consider it to be strictly “unsafe,” but they also did not feel comfortable using it themselves. Most participants indicated that they were glad the space existed in some capacity and that it was likely useful to some people, but that the atmosphere and uses of the centre did not align with their personal needs. Danny explained his reluctance to use the space, saying, “I’ve heard...that it tends to be kind of cliquy and there’s almost a crowd that hangs out there and that, you know, I don’t think I’d feel comfortable.”

While participants did not photograph the Pride Centre specifically, there were a few advertised Positive Spaces throughout campus that they did photograph. Scott, for instance, took a photograph of the former Student Health Centre located in Saskatchewan Hall. In his interview, he noted that the Positive Space signage was not the only reason that he included



*Figure 5.13: Student Health Centre
Photo by Danny*

the space, as he was a Medical student, was familiar with the space and felt that the Health

Centre made a point to attempt to address queer health issues, but he did make a conscious decision to frame his picture in a way that included the outer doors to the clinic. These doors were where the Positive Space sign was displayed. Isaac also included one of the Positive Spaces



*Figure 5.14: Student Club Door
Photo by Isaac*

on campus in his photographs. This particular space was the room reserved for a student group that he led. As with Danny, the decision to photograph this space was not solely related to its Positive Space status. Isaac spent a large portion of his time on campus in this particular space, so he had a deep, personal connection with it, to the point that he described it as a “second home.” He did, however, make a point to photograph the door to this room and the Positive Space sign displayed there in one the photos that he took of the space. During his individual interview, he also mentioned that he was the one who “did the whole positive space test” and went through the necessary steps to make the room a part of the Positive Space program. Based on this, it seems as though the Positive Space program is something that participants recognized and at times appreciated, but it was still not the sole deciding factor in their decision to label certain spaces as safe. In many cases, it would seem that personal experience and familiarity with a space played the primary role in this decision.

Other areas of campus where participants seemed to focus their attention were generally related to their daily routines and individual experiences as students. Participants tended to photograph spaces that were related to either their studies or other activities that they took part in around campus. Derek, Isaac, and Lydia all took photographs of the buildings that housed their

departments. Scott took a photo of the sign belonging to the building in which he had the majority of his classes. Danny, a med student, took a picture of the Student Health Clinic. These were all areas that participants had grown most familiar with during their time at the University and with which they had strong, personal ties.

Broadway



"It's the one place in the city that I've seen gay couples—or queer couples—walk down the street holding hands."

Figure 5.15: Broadway District – Photo by Danny

The other safe area shared between participants was the Broadway district and, in particular, the main business section of this district. While this may not be quite as obvious a choice as the U of S campus, it is not one that was entirely unexpected. The Broadway district is within walking distance of both the U of S campus and the homes of many students, and it is mostly comprised primarily of small-scale, locally owned businesses. These businesses include a grocery co-op, a coffee and tea shop, several restaurants, several stores devoted to clothing and footwear, and two separate coffee shops. Broadway is also home to several of the local pubs and bars that are popular with students. Many of the bars found there frequently host small-scale concerts and are a popular with certain portions of the university student body as a result. Some of the area's other pubs and bars



*Figure 5.16: Bronze Buskers
Photo by Lydia*

are also popular with students because of their smaller scale and more intimate atmosphere when compared to some of the larger dance clubs around the city. The district also boasts other forms of entertainment, such as the Broadway Theatre, a facility that shows independent and cult films and also hosts concerts and plays, and the Refinery, a performing arts centre associated with one of the district's churches. The district is also known for being frequented by students and other people known for having a more "liberal" attitude.

This liberal attitude was one of the primary reasons that many participants labelled the district and several of its individual businesses as safe. Danny, who admitted that he had some trouble finding safe spaces outside of campus, described the Broadway District as having an



Figure 5.17: The Refinery
Photo by Scott

“open mindset” and said that he felt “that area and campus are kind of the geographical centers of (the Bohemian) sort of attitude.” This type of mindset and atmosphere was one that several of the participants commented on. Lydia called Broadway a “diverse community” and Derek described it as “the most progressive, eclectic area of town.” Participants also emphasized that

they felt it was gay and queer-friendly. Both Danny and Scott noted that part of their individual reasoning for photographing Turning the Tide Bookstore was the Positive Space sign displayed in one of its windows. This is somewhat significant, given that very few spaces outside of the U of S campus advertise being queer-friendly in this way. As Danny pointed out, “[Turning the Tide] is one of the two shops in the city that actually have a Positive Space sticker and they’re

both in that area.” For Danny in particular, this seemed to be indicative of the overall attitude toward queer individuals within the district and the more accepting attitude of the area as a whole.

For several of the participants, Broadway not only had an atmosphere that felt "right," but it also attracted the types of people that they associated with acceptance, and participants all had a certain degree of personal attachment to and familiarity with the area. Participants generally attributed the more accepting atmosphere of the district to the people who worked and shopped there or otherwise made frequent use of the space. They felt that the crowds that tended to congregate there were of a more “open mindset” and were thus inclined to be more liberal and accepting of differences, including differences in sexuality and gender identity. Some of the



*Figure 5.18: Broadway & 10th
Photo by Derek*

participants also had a more personal connection to the district. Derek said that he used several businesses in the area fairly regularly, including the Broadway Starbucks. This Starbucks, along with being one of his favourite coffee shops, was also where he met his most recent long-term partner, and it held a lot of fond memories as a result. Lydia, who worked part-time at one of the district’s bars, described the area as a community. Because of her job, she considered herself a part of the community and said, “Once you’re there, you know the people.”

5.2.3 Safe Spaces According to Use

In addition to individual safe spaces and safe areas in Saskatoon, there were also a number of common place types that participants photographed. Unlike the places listed as common safe spaces and safe areas, these places tended not to share a common geographic area. Instead, the link between many of these places was their intended use and/or the parts of their lives with which participants associated them. Generally, the intended uses of these places were things such as food or entertainment that tend to play at least a small role in many people's social lives and free time. This was no less true for participants, many of whom discussed spending portions of their free time watching movies, going out for drinks or coffee with friends, or eating out. Many of the specific places that they discussed also filled a particular role within their lives, such as transportation, living space, or place of work. Because of the more individualized nature of these particular spaces, there was not much in the way of overlap between the specific spaces that participants photographed. The overlap, instead, came from participants' various uses and associations with them.

The overlap and recurring themes between the places that participants photographed was quite obvious in some cases, which has lead me to believe that these different categories of spaces are important to the overall concept of safe spaces. The fact that many participants photographed the same types of spaces provides insight into which categories of spaces are a) important to queer students in their daily lives and b) more likely to be considered safe. The locations discussed by participants can be used as an indication of the types of spaces that groups and individuals attempting to create safe space programs might want to consider targeting.

While there are a number of common themes found among the places included in the Photovoice portion of this research, I am focusing my attention on four categories in particular.

These categories include: home life, "nightlife" and entertainment, meeting places, and places of work. These categories were the most frequently photographed, and I feel that I can address them without being overly redundant or overlapping too much with the previous discussion of individual safe spaces and safe areas.

Home Life



“My home is my sanctuary.”

Figure 5.19: Living Room – Photo by Derek

A common theme of participants’ photographs was the tendency to photograph personal spaces and, in particular, their homes. Considering the emphasis that participants placed upon places with which they had either a personal or an emotional connection and the importance of the “feel” of a particular safe space, this is not surprising. Where can an individual feel safe and welcome, after all, if not in their own home?

The majority of participants lived either on their own, with close friends or siblings, or with a significant other. Being adults and living independently meant that they tended to have a high degree of input into what went on in their homes. This may not have been the case, had the study targeted individuals in high school or who were less independent. However, since the participants were all in their 20s and 30s, their homes were typically spaces over which they held a great degree of control, meaning that they could regulate who else had access to the space and, for the most part, what sort of activities took place there. When asked about why he had chosen

to photograph a particular part of his home, Scott summarized it thus: “Number one, it’s in my room, and nothing happens in my room that I don’t want to happen in my room because it’s *mine*.” For Scott, these feelings of ownership and control helped to make his home a safe and comfortable place for him. He did not feel that he needed to worry about bad things happening in his home because he was the one calling the shots. This is an ability that most participants associated with their current homes and other highly personal spaces, and it was an important factor in the labelling of these spaces as safe.



*Figure 5.20: Living Room Keyboard
Photo by Scott*

Lydia provided a good example of the importance of this sense of control when talking about a house that she lived in during her first year of university. In her words, “Sometimes it



*Figure 5.21: The Den
Photo by Lydia*

was not a safe space. My god. So, reasons—well, ways that you could make a house unsafe is make it a party house for the football team and have one of them be someone who feels, like, may have crossed some boundaries and that sort of thing.” She contrasted this with her current residence, saying, “This is the second home that I’ve had here that feels like a potential home, and this one’s less of a party house than the last one was. So that’s—even that’s going to be an advantage. Even the last one wasn’t a home, it was like—this one is quiet, peaceful. It’s good.” She also spoke of the sense of personal connection that

she had with her roommates, both of whom are close friends. This sense of personal connection seemed to be just as important as her ability to control what went on in the house, as it was important to her that she not feel alienated from her home. Having close roommates as friends gave her an added sense of connection with the house that she did not have with her previous residence. The sense of alienation that she felt in her former residence led to her not being able to fully connect with the space, whereas her current home was “cozy and comfy” and “a safe place to hide.”

Participants’ sense of personal connection to their homes was also reflected in the decoration and various personal touches that they added within these spaces. The ability to decorate these spaces and, in essence, “make” them their own deepened the bond that some participants had with these spaces and allowed them to “stake their claim,” while at the same time expressing themselves creatively. For some participants, this creative expression functioned as another form of control that they had over their homes, allowing them to dictate the physical appearance of the space and shape it in the way that they saw fit. The ways in which participants decorated their homes also reflected parts of their individual personalities. For instance, Derek’s home was decorated using neutral colors and a number of heirlooms, reflecting his strong connection to his family and the color palette that he tended to favour in his photographs. In her home, Lydia favoured warm colors, personalized artwork, and other small gifts from family and friends. This mirrored many of the brighter, more vibrant colors that she used in her photographs and her personal interest in photography and art.



*Figure 5.22: Dining Room &
Kitchen
Photo by Isaac*

These types of personal touches were apparent in many of participants' photographs, where various types of art, furniture, knick-knacks, and personal mementos decorated their living spaces. The overall effect in many of these pictures was that these spaces tended to have a more "warm" or "lived-in" feel, and felt less impersonal and removed than some of the more public, general spaces that participants photographed.

Participants' level of control over their homes, combined with their familiarity with the space, also allowed them to create a more positive atmosphere within them. Their homes were "comfy," "cozy," and "welcoming". They were not only places to sleep and eat and store possessions, but also served as sanctuaries and provided participants with a place that belonged to them as individuals. For many of the participants, their home spaces possessed all three of the main elements used to label safe spaces: the presence of friendly and/or like-minded people; a personal or emotional connection and generally sense of familiarity with the space; and a pleasant, generally comfortable atmosphere.

Places of Work



Figure 5.23: Work Door – Photo by Derek

Another type of safe space that participants' photographed frequently was their workplace. Like the attention given to their homes, the focus on participants' places of work also makes a certain amount of sense. As students, participants spent the majority of their time either at home or on campus. Given that four out of five participants were also employed either full- or part-time, they spent a large portion of their remaining time at work. While workplaces did not provide the same degree of control for participants as their homes, these spaces were still familiar enough for participants to feel comfortable. Participants also generally felt comfortable around their co-workers and other people who made frequent use of these spaces. However, this may not have been the case with a different group of participants. The participants in this study all enjoyed their jobs and thus felt comfortable within their work places. Had they been less satisfied with their jobs, this may not have been case, and they may have felt considerably less

comfortable within their workplaces. Conversely, it may be that the participants' level of comfort within these spaces made their jobs more enjoyable.

One thing that participants tended to emphasize when speaking about their places of work was their relationship with the people within those spaces and, in particular, their co-workers. Having a good relationship with co-workers generally provided for a welcoming work environment. For some participants, such as Isaac, their co-workers were people with whom they also had a relationship outside of work. Their co-workers were not only people with whom they shared a workplace, but also friends. In Isaac's case, many of his friends were people that he had met either through his department at the university, during his volunteer work on campus, or through his part-time job. He felt he had a good relationship with his co-workers, several of whom also identified as queer. The general atmosphere within his workplace was one of acceptance. As he said, "With everybody there...they've, like, pretty much have no problem with who I am and no problem with me being gay or anything." He said he felt comfortable discussing queer issues with co-workers, although the space itself was not strictly queer. His sexuality was accepted there, but his co-workers did not treat it as the only or even the most important piece of his identity. Isaac also noted that, in addition to being accepting of his sexuality, roughly a quarter his co-workers were also university students, and the general work environment was accepting of students and people of a similar age.

For Lydia, her co-workers were not the only people who affected her degree of comfort within her workplace. The patrons of the bar that she worked at also had a significant impact on her comfort there. She felt that many of the bar's regulars were people with whom she found it easy to relate. The bar at which she worked was, in her words, "[I]ts own little microcosm of diversity. And it really is. Like, you meet so many kinds of people working there." In addition to

this general diversity, working at the bar gave her an added sense of belonging and made her feel like a part of the larger Broadway community. She described the bar and the surrounding



Image 5.24: Broadway Bars
Photo by Lydia

businesses as "a little family" and said, "[I]t's just, yeah, you know the people. Once you're there, you know the people." One of the reasons that she gave for originally wanting to work in the bar was that it reminded her of her hometown. This sense of belonging and community explains, in part, how the bar could

remain a safe space for her, despite some of the unsafe activity that sometimes occurred there. The bar and the surrounding community were not merely her places of work, but also functioned as a reminder of her home.

It is interesting to note that not all participants who felt safe within their workplaces were out as queer to their co-workers. In Scott's case, he worked at a local gym as a lifeguard and swim instructor and made a point not to discuss his sexuality with current co-workers, as he was "of the opinion that, you know, it's not really anyone's business but my own." The only people tied to his work life to whom he was out were former co-workers with whom he remained friendly. This decision was less because he felt his co-workers would not be accepting of his sexuality, and more because he felt that his sexuality did not matter in this context. Any worry that he did have about possible discrimination as a result of his sexuality was related to the parents of the children he worked with rather than his co-workers. This worry was also part of the reasoning he gave for not making use of the Pride Centre, as he felt that going there would "be admitting it to the world." In spite of this, he still felt that his workplace was a safe space,

perhaps because the decision to not come out was a personal one and not one that he felt was forced upon him. While this decision may have, in part, been a precautionary measure, it was also one that allowed him to dictate that his sexuality was not important within that particular space.

Nightlife and Entertainment



“You get to learn a lot about people by just talking about movies... you can tell a lot by the type of movies that people like.”

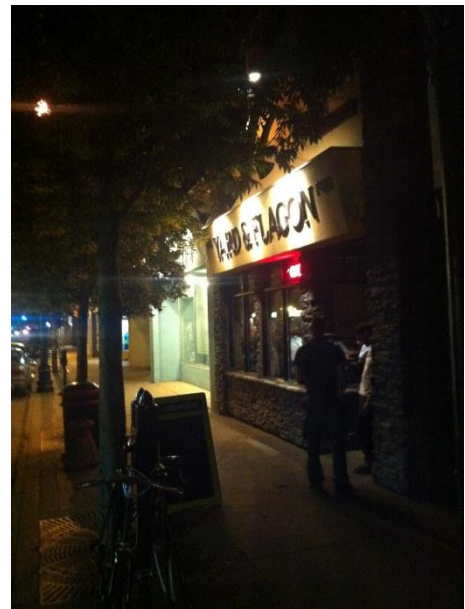
Figure 5.25: The Galaxy Cinema – Photo by Scott

In addition to home and work spaces, many of the participants’ photographs focused on spaces that were related to their use of free time. These “free time” spaces fell into several different categories, but generally involved hobbies and time spent with others. For the purposes of this study, I am focusing on the two categories that were the most frequently photographed and also seemed to be the most relevant to the elements that participants used for labelling safe spaces: nightlife/entertainment and meeting places.

The first category of free time spaces, nightlife and entertainment, included places whose main purpose was to provide entertainment. Some of these spaces, like the Galaxy Cinema, the Mendel Art Gallery and the Refinery, catered to specific types of entertainment, such as movies, theatre, and the arts. Others, such as the Yard and Flagon, 302, and Diva’s, were more focused on drinking, dancing, and other elements of what might be considered the "night life." These

spaces, when compared to home spaces, provided a much more impersonal experience. Due to their size, public nature, and the large crowds that some of them drew, it can be assumed that these spaces have a much greater potential for alienating individuals. However, most participants had some degree of personal connection to these places, either through the connection that some of these places had with participants' hobbies or interests, or through the time spent with friends and family members within these locations and the memories that resulted from these shared experiences.

Many of the safe spaces related to entertainment and night life that participants photographed reflected both their personal interests and particular aspects of their individual personalities. In Lydia's case, she was interested in music and chose to photograph a record store in the downtown area. Danny, on the other hand, took photographs of a pub and the Mendel Art Gallery, which reflected his enjoyment of art and going out for drinks with friends. Isaac's enjoyment of theatre and art was reflected in the photographs that he took of both the Museum of Classics and the theatre found on campus. Derek and Scott were both fans of cinema and chose to photograph the Galaxy Cineplex. In Scott's case, he spent a large portion of his free



*Figure 5.26: The Yard & Flagon
Photo by Danny*

time going out to see movies with friends and family members. The Galaxy was a safe space for him because of the association he had between it and various people who were close to him. In addition to this, the space was also tied in with his sense of self-expression. Going to the theatre

allowed Scott to take part in a past-time (i.e. watching films) that he enjoyed and provided him with a break from his everyday routine. As he described it:

It's an escape, really. You get to go in there and you get to—it doesn't matter who you are when you're in a movie theatre because you're escaping into other characters' lives. You're immersing yourself in their experience rather than dealing with your own.

Part of the reason that Scott was able to connect with the space on a personal level and feel safe within it was because it allowed him to temporarily disconnect from other parts of his life and any associated problems.

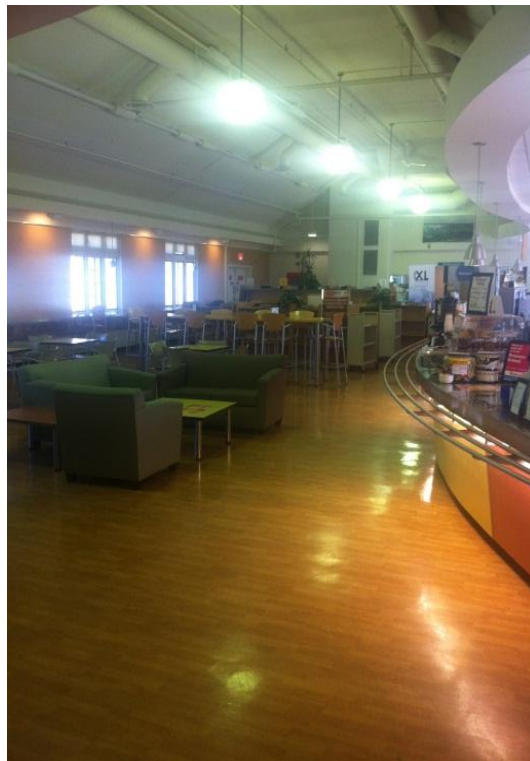
In addition to allowing participants this brand of temporary escape from everyday worries, these types of free time spaces also served to strengthen participants' social connections. When participants discussed these spaces, they often spoke of the time they had spent within a particular place with friends, family members, or other loved ones. Many of these places were used primarily to socialize and served to strengthen existing relationships or, occasionally, to help build new ones. In Scott's case, he spent a lot of his time at the theatre with either his best friend or his sister and the space was one that he associated with his relationship with them. During his individual interview, he mentioned having recently invited his sister out to see a movie because he had been busy with work and, as a result, they had not been able to spend much time together. Going to the movies together allowed them to reconnect and unwind. However, Scott did not limit his time spent at the movies to close friends and relatives. He also mentioned that he enjoyed going to see movies with new friends and acquaintances, as a way to

get to know them better. He felt that movies were a good choice for this type of outing since "everybody likes movies," and also because:

It's an easy way to get to know someone. Not so much in the movie because, you know, talking is bad. But it's just a—you know, you get to learn a lot about people by just talking about movies. Like what movies interest you and what interests—what movies interest me. You can tell a lot by the type of movies people like.

Thus, the theatre and other spaces like it not only provided a way for participants to relax and strengthen pre-existing relationships, but they also provided individuals with a space that they could use to forge new relationships based upon shared interests and experiences.

Meeting Places: Restaurants, Coffee Shops & Bookstores



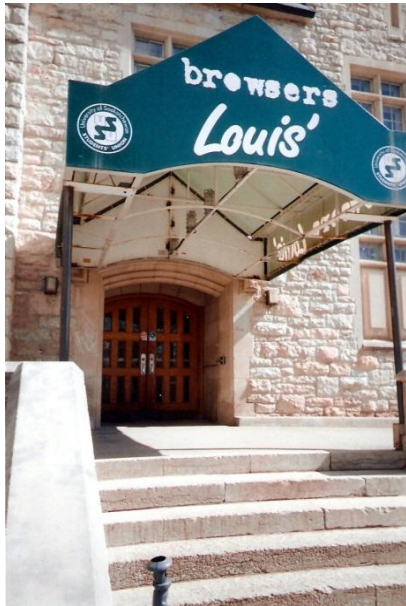
"I think it relates in that way, but... um, again, it's kind of a meeting place. Just somewhere that you go for brunch or coffee or whatever."

Figure 5.27: Browser's - Photo by Danny

The last type of safe space shared between participants was the meeting place. These spaces were also used primarily for free time, but unlike the spaces intended for entertainment and nightlife, these spaces functioned primarily as places where participants could spend time with friends and family members without "outside" entertainment. While most of these places have specific functions, such as selling books, coffee, or food, it was the social element of these places that participants emphasized. People go to coffee shops, restaurants, and bookstores alone, but participants primarily referred to these as places to spend time with others, such as friends and family members. There was a social element to entertainment and nightlife spaces as well,

but there were other activities that happened in these places, such as art displays, plays, and movies, that defined a lot of the interactions that took place there.

Interaction with friends and family was often the main reason that participants considered these spaces to be safe. They associated places like bookstores and coffee shops with time spent



*Figure 5.28: USSU Student
Union Building
Photo by Isaac*

with friends and family members in a general sense, and also associated particular places, such as Browser's and Starbucks, with specific people. Time spent in these places with friends helped to make them safe while, at the same time, the fact that these safe spaces had a good general atmosphere meant that participants were more willing to spend more time within them.

Interestingly, several of the meeting places photographed were located in the Broadway District. The fact that they were located on Broadway, one of Saskatoon's safe areas, may have contributed to their relative safety, or it may also be that the

number of these types of meeting places on Broadway helped contribute to the positive atmosphere in the district as a whole, or it may have been a combination of these. The Broadway District itself is also within walking distance of campus, and many students live in this area during the school year and make regular use of many of the places that were photographed. Participants, being university students, may also have felt a sense of belonging here, as they did on campus, because of the number of fellow students found there.

Danny chose to include several of these types of places within his pictures. He admitted that he did not make frequent use of Browser's and generally only spent time there once or twice a month, but he thought it was important to include because "[I]t's kind of a meeting place, just

somewhere that you go for brunch or coffee or whatever." He described McNally Robinson, another bookstore, as having a similar feeling, and said that both were places that he enjoyed spending time together with friends. Both places were also ones that he felt were generally accepting of queerness, so he felt more comfortable spending time there, both individually and with friends. Derek had similar feelings about the Broadway Roastery



*Figure 5.29: 2nd Street Starbucks
Photo by Derek*

and both the Broadway and 2nd Avenue Starbucks. These were places where he felt he was able to go and spend time with close friends and "be himself." He had good memories of friends connected with these places and, in the case of the Broadway Starbucks, it was even where he met one of his long-term partners. The memories that he associated with these places strengthened his personal and emotional connection to the space and added to the sense of comfort and safety he felt while there. In this way, these types of spaces not only provided places in which participants felt comfortable being themselves, but also allowed them places to build or strengthen their connections with others. This can be said of the majority of the free time spaces that participants discussed. Entertainment and nightlife spaces provided places where individuals could socialize and bond over mutual interests and entertainment, while meeting places provided participants with places to focus more on conversation.

5.3 Identity: The Sum of Many Parts

Overall, the data within this research seem to support the idea that queer identity and identity politics involve more than just sexual activity and desire. Participant interviews and group discussions, in particular, reinforce this idea. During these discussions, participants emphasised individualism and multiple facets of identity, placing queerness as a piece of the larger puzzle of identity. As a part of this puzzle, queerness was always present, but its relative size and importance in the face of the "big picture" varied depending upon the individual, situation, and place in question. Many of participants' comments on how their sexuality affected their overall identity were indicative of the complex nature of identity, a complexity that I cannot address fully within the context of this thesis. However, I can discuss the importance of identity to my participants and how this might be utilized in future research.

This exploration of participant identity, and specifically queer identity, focuses on three of the recurring themes found within this research. First, I discuss the multi-faceted nature of identity. Much of the previous research has treated queerness as the primary, or sometimes even the only, component of individual identity, while overlooking or down-playing the importance of the other ways in which individuals identify themselves. Second, I provide a brief discussion of safe spaces as sites of exclusion. While there is research that touches on the potential for exclusion within queer spaces, there has been very little done regarding safe spaces and the ways that the perceived queerness within these spaces can be used as a means for exclusion. Third, I discuss the relationship between safe spaces, sexual activity, and desire. There has been a fair amount of research regarding the relationship between queer spaces, sexuality, and desire. However, much of this research equates sexuality and desire with queerness, and the majority of spaces labelled as "queer" within the research have some sort of sexual component. It is my

contention that queer spaces are not only spaces that involve or are related to sexual activity and desire, and the research should be expanded to reflect this.

5.3.1 Different Degrees of Identity

Identity is a complex, multi-dimensional concept that has been studied by many researchers across the humanities and social sciences. Identity is still the focus of much debate, and our understanding of its meaning is constantly shifting. Researchers such as Foucault, Butler, and other researchers in fields ranging from feminism to health research have devoted large portions of their work to discussions of the meaning of identity, its different aspects, and how it is formed (Woodward, 2004). While there is still much discussion about the ways in which individual identities are formed, many researchers acknowledge that there is a distinctly social component involved in identity formation. A prime example of this, and one that ties in well with this particular research, is Social Identity Theory. This theory explains the differences in an individual's social behaviour, labeling, and self-conception between different groups as a reflection of that individual's self-identity being partially derived from and influenced by their perceived status within that group or certain group. As Woodward (2004) summarized it, "Identities are formed through interactions between people. When people take up different identities there are different processes taking place as people position themselves, and are positioned, in the social world" (p. 1). Our identities are influenced by these interactions and by the societies and cultures to which we belong, but we, as individuals, are also responsible for the formation of our own identities. This is accomplished through our interactions with others, the ways in which we present ourselves to the world around us, and the labels that we choose to assign or not assign to ourselves (Woodward, 2004). Our identities are thus a combination of our interactions with ourselves, with others, and with the world, as well as the labels we use to describe ourselves. There are many different types and kinds of identity, and it is important to take all of these into consideration when discussing identity. While it can be useful to focus on a

specific piece of an individual or group's identity for the purposes of research, we must also keep in mind that the piece that we chose to focus on is not the totality of their identity.

This multiplicity of identity is often overlooked within queer health research. Researchers have had problems targeting queer individuals for health research, partially because of issues surrounding identity and labelling. Individuals who identify as queer do not necessarily primarily identify as queer, but much of the research into queer health places queerness above other aspects of those individuals' identities. Likewise, much of the research into queer identity and use of space tends to focus on spaces that are coded as only or primarily queer, while overlooking the relationship between queer individuals and "non-queer" spaces. Many safe space programs also follow this line of reasoning and tend to focus on queerness, treating it as the most important aspect of an individual's identity. However, while spaces that privilege queerness above other forms of identity are important and necessary, there is also a need for an exploration of safe spaces that takes into account multiple aspects of identity.

Identity was an undercurrent behind much of participant discussion within this research, and it played an important part in the relationship between participants and space, and the ways in which they negotiated and labelled those spaces. For the participants, identity was about more than just queerness. While they were all generally very open about and willing to discuss their sexual orientations and gender identities and readily identified as queer, this was not the only aspect of their identity that they expressed and, for many, was not even their primary identity. As Isaac said, "I'm just me and, yeah, being gay is one part of me, but it isn't...it doesn't define me." This idea that queerness was an important part of participants' identity, but not necessarily the most important part or the one that they wished to define them as individuals was echoed by many of the participants. Participants did not want their sexual orientation or gender identity to

be the defining quality in their friendships and other non-romantic relationships with others, and they preferred to have these relationships be based on others sharing in their hobbies or interests or enjoying their personalities. Most participants mentioned not having many queer friends. This could be partially due to the relatively small size of the queer community in Saskatoon, but it is also likely related to the fact that participants did not feel the need to befriend people based primarily on their sexuality. Most participants seemed to be aware of other queer people, and in particular those queer people with whom they had attended high school or grown up, but this awareness did not automatically lead to friendship. Participants' queerness influenced their friendships, in that most felt they could not be friends with people who were not accepting of that part of their identities, but it did not define them.

The majority of participants also expressed a lack of interest in joining groups or clubs based primarily on their sexuality. This desire to not be defined solely by their queerness was one of the reasons participants gave for avoiding the Pride Centre. Lydia and Danny discussed this particular point during the orientation session, and had the following to say about it:

Lydia: Well, I don't really have an interest in, um, joining groups based on my identity in that way. Same thing with the Women's Centre. I went to, like, one video they did once 'cause I was covering it for the Sheaf. Um, but as far as the centres go, uh, that's just not the way I choose to make—like, I identify by my college, not by my gender or whatever.

Danny: Yeah, I kind of feel the same way, where I wouldn't want to create my social network solely based on, you know, my sexual orientation.

Joining groups that emphasized only one part of their identity, especially if that part of their identity that was personal and not related to academics, was something that most participants avoided. This was also true when it came to use of space, with participants preferring spaces that did not target one particular aspect of individual or group identity. Overall, participants seemed to prefer both spaces and groups in which their queerness was not the main focal point, as this emphasis on queerness could lead to a sense of exclusion.

5.3.2 Identity, Safe Space and Exclusion

While there is a need for spaces that promote and focus specifically on queerness, as there are individuals who benefit from these types of spaces, it is crucial to remember that these are not the only types of spaces that queer individuals need. This is especially true when talking about safe spaces, which are meant to be safe, inclusive spaces for all queer individuals. However, in some cases, these spaces overlook non-queer aspects of individual identity, which can imply that queer individuals all place the same degree of importance on their sexuality and gender identities. Participants seemed to view the USSU Pride Centre as operating at least partially under this assumption, and this was part of their reasoning for not making use of the Center's programs or including it in their photographs. While the Pride Centre was intended for queer individuals in general, participants felt that it promoted and emphasized a certain type of queerness.

Participants described the atmosphere of the Pride Centre and the people that they associated with it as being "politically queer," but participants did not identify with this particular brand of queerness and had little interest in the political-mindedness that they associated with the centre. This disconnect between participants' identities and the type of identity that they associated with the centre meant that the space itself was in some ways exclusionary. Participants did not feel that they belonged there because they were not the "right" kind of queer. In Lydia's words:

It's identified so. *Pride* Centre. Um, but if you're not a particularly politically-minded queer individual, going there's not going to be beneficial. And...it's like going the opposite direction from being really heteronormative. 'Cause it's like, only people who are proud about being gay.

Danny elaborated on this, saying, "It's almost like it's self-segregating, obviously?" While there are certainly individuals within the queer community at the U of S who benefit from the Pride Centre and the services it offers, my participants did not consider themselves to be part of this group. This meant that the space and its emphasis on a particular type of queerness came across as exclusionary and could be off-putting. In addition to this, many participants saw the Pride Centre and its support services as being more beneficial to individuals new to their queerness. They believed that younger students and those still in the process of coming out would have more use for the centre, while individuals who were already out were more comfortable with their identities and did not need the majority of services that the centre offered. Participants were all individuals who had been out for several years, so they did not feel that they needed to use the centre. Since they also did not consider themselves political, and thus did not feel that they fit in with the majority of the crowd that regularly used the space, they saw no need to use the centre themselves.

Oddly enough, despite the general view that the Pride Centre was too "political," several participants also expressed the idea that most of the centre's activities being campus-only made them less effective than they could be. The Pride Centre activities that participants spoke about included the annual drag show and various queer-themed lectures and seminars, including Queerapalooza. While participants did not seem to view these events negatively, they were also not interested in attending them. The events that participants mentioned all took place on campus and were aimed specifically at the student population. Since campus was seen as a safe area and people on campus were believed to be generally accepting, participants felt that these events were somewhat redundant and were less effective on-campus than they may have been elsewhere. Scott believed that events that connected the campus queer community to the broader Saskatoon

queer community would be more useful. He thought that campus queer groups could benefit from aligning themselves with queer groups and businesses in the community, such as 302. Another of Scott's criticisms of Pride Centre events was that they seemed to be somewhat repetitive, which was part of the reason he had little interest in attending them. In his words:

I've never been to any of the seminars either, but the seminar topics are always the same. Like, from the posters? I'll be like, wasn't that what they talking about last year...? So, to me there's, you know, not very much variety, so to speak.

Holding events in off-campus community spaces would give queer students and community members further opportunities to interact, while also allowing for more variety between events.

Participants emphasized that many of the spaces that they considered safe were ones within which queerness was not treated as a negative, but was also not the focus of most interactions within those spaces. The people making use of those safe spaces knew about and generally had no issue with participants' queerness, but they also did not focus on that queerness or act as though it were the totality of participants' identities. One of the reasons that Lydia felt that her department study space was welcoming and safe was the lack of emphasis people there placed on sexuality. In her words:

So it's another one where, like, sexuality is just like...eh, not really a thing that any of us care about because we're all friends because of [our department], not because of—well, sometimes because of crushes on each other. But that's not the main thing.

She expressed similar sentiments about the Farmer's Market, stating, "[T]he only community it has is people who are like the (larger Saskatoon) community." This lack of emphasis on sexual

and gender identity meant that her sexuality was not a requirement for using or belonging within these spaces. Acceptance within these safe spaces was perceived as not being dependent upon adhering to a certain type of queerness, or with identifying yourself as queer above all else. Instead, they emphasized the sum of an individual's identity, or a piece of their identity that they felt was most important. These pieces of identity were most often related to personal interests, such as an individual's choice of major or their preferred past time.

5.3.3 Safe Spaces, Sexual Activity and Desire

In addition to participants' tendency to prefer places that did not focus solely on queerness or, more specifically, on certain types of queerness, there was also little focus on places related solely to sexual activity and/or desire. This is not to say that these elements were completely lacking from participant photographs and interviews. Most participants mentioned both sex and desire at some point in their interviews, and there were a handful of locations among participant safe spaces that were associated with sexual activity and desire. The best examples of these would be Diva's and 302, the Internet, and a small shop dedicated to selling pornography and sex toys in the downtown area. There were also several places that were contextually related to sexuality and desire via anecdotes provided by participants. Some of these, such as a church photographed by Scott, were somewhat unexpected, as they were not places that are generally associated with sex or desire. However, even with these examples, the majority of participant safe spaces were still not related directly to sexual activity. This suggests that there is a need for researchers to explore those facets of queer identity and use of space that are not directly sexual.

Participants did not shy away from discussing romance or sex when they were relevant to the conversation. Derek, Isaac, and Scott, for example, all discussed past relationships. Some of these stories involved sex, but for the most part, the emphasis was on relationships in general, including the non-sexual aspects of those relationships. Derek and Scott also spoke of places that they associated with dating and relationships. There were certain places, like the aforementioned church, that participants associated with specific sexual encounters. However, most of the safe spaces that participants discussed, such as Diva's, 302, and even Starbucks, were related to dating in a more general sense. For both Scott and Derek, the Internet was seen as a

place to meet new people and a potential tool to use in starting new relationships. There was a certain degree of sex involved in some of these relationships, and at times the Internet could be used as a place to "hook-up" with other gay men, but this was not its only function. Scott and Derek both discussed using online dating sites to meet other gay men for the purpose of forming a romantic or sexual relationship, but this was not the only way that they used this space. Both men also used the space to make new friends and also to keep in touch with old friends.

Sex was one of the ways that participants interacted with space, but not the only way. Sexual activity and desire were important elements of participants' lives and of their interactions with some places, but they were generally not the only factors that dictated their use of space. Further, sexual activity and desire were not the determining factors for most safe spaces. This would seem to indicate that, while studies that focus on sites of desire and sexual activity are important, other types of spaces are also relevant to queer individuals and their lives. Sexual activity and desire are a part of queer identity and queer individual's lives, just as they are for non-queer individuals, but they are not the sum total of that identity. The general focus by participants within this research on general public spaces and sites related to important elements of their everyday lives, such as home, work, school, and free time, would seem to indicate that these every day, non-queer spaces can be just as important to queer individuals as places specifically tied to queer identity or desire.

5.4 Queer Identity and Use of Space

In addition to expanding ideas around queer identity, this research has indications about the relationship between queer identity and use of space. As the results suggest, queerness did not seem to be the determining factor in participants' use of space. It is important that the research explore this, given the emphasis that previous research has placed on sexual orientation and gender identity. The fact that most of the places that participants labelled as safe were not "queer" spaces would seem to indicate that queer-specific or queer-only spaces, while still important for many people, can also be exclusionary for some. For this reason, those working to make designated safe spaces should consider a mixture of spaces that are queer-specific or queer-only and more general in their usage in order to welcome more members of the queer community.

Most places that were photographed and discussed by participants were not specifically "queer" or "queer only." Several participants included photographs of clubs such as Diva's and 302, which catered to a primarily queer clientele, but they noted that they did not make frequent use of these places. Some participants also associated these places with specific friends rather than with the queer community as a whole. For many participants, spaces did not have to be labelled as queer or cater to the queer community to be considered safe. Instead, they simply needed to be welcoming and accepting. This suggests that there is a need to explore the potential of "general" public spaces as unintentional safe spaces and to expand the definition of what constitutes a safe space. If the people who frequent a place or its general "vibe" are often more important than its target demographic, then this may be something that policy makers should take into account in the future.

Interestingly, these results also seem to suggest that spaces can be "made" queer, or at least queer-friendly, through the presence of and/or use by queer individuals. Some past research

in geography of sexuality has explored potential ways that spaces can be temporarily queered by events such as pride parades and other queer-specific activities that make use of certain spaces for a limited period of time (Browne, 2007a; Browne 2007b; Matejskova, 2007). However, these studies tend to focus on large-scale events and do not address the ways that queer individuals might queer "general" public spaces, both on specific occasions and in more permanent ways over time. It also calls into question the assumption that public spaces are, unless otherwise indicated, automatically heterosexual. The number of places that participants photographed and mentioned in interviews that were public spaces would seem to indicate that perhaps spaces are not inherently heterosexual, but instead are neutral and can therefore be influenced by the beliefs and actions of the people who utilize them, making them more or less "queer."

5.4.1 Unintentional Safe Spaces

The basis of safe space programs has always been the creation of visible, easily identifiable spaces that are free of discrimination and otherwise welcoming to queer individuals. This is generally accomplished through the use of signage or some other type of visible advertisement ("Resources for Safe Zone Programs," 2008). This increased visibility of welcoming spaces is meant to create a safer, more accepting environment that recognizes and promotes acceptance ("Resources for Safe Zone Programs," 2008; The Community College of Baltimore County, n.d.). It is important to make clear to queer students that this type of support and acceptance exist. However, most of these efforts revolve around places that are intentionally made or labelled as safe, while otherwise downplaying or overlooking those places that may function as unintentional safe spaces, or at least "unintentional" in the context of these programs.

The signage used to mark safe spaces has its use. They indicate to queer students that the people who make regular use of a particular place are more likely to be accepting of queerness and that that place should be free of homophobia, and they also demonstrate overall support of the queer community. A lack of this type of signage, however, is obviously not an indicator of non-acceptance, as there are a variety of reasons people would choose not to include their space in a safe space program. This lack of signage also does not mean that these places do not function as safe spaces. There are many places, in fact, that function as safe spaces on an unintentional level. While there may be efforts made to make these places more accepting, these efforts may not be aimed solely or even primarily at acceptance of queer individuals. Many of the places that participants focused on were these types of unintentional safe spaces.

One of the best examples of an unintentional safe space is also one of the most frequently photographed safe spaces within this project, the Saskatoon Farmer's Market. The Farmer's

Market is not specifically geared toward queer individuals. It is not an advertised safe or positive space, and it functions as a general public space. However, participants still viewed it as generally safe and accepting. When commenting on the reasoning behind including the Farmer's Market, Danny said, "I think the Farmer's Market falls in the same vein as [Browser's, McNally Robinson, and The Yard & Flagon]." For him, these places all had an inviting atmosphere that accepted queerness, but did not fixate on it. Lydia also considered the Farmer's Market to be a safe space and described it as a "diverse" place, focusing on its acceptance. The intention of the space itself was not to provide a safe space, but to provide somewhere that people within the community could buy local produce, but the focus on food rather than other aspects of identity meant that the space felt more inclusive to participants. In Lydia's words, "If you enjoy homemade things you go. It doesn't matter who you are."

The Farmer's Market is a safe space not only because of the lack of emphasis on individual aspects of identity, but also because of the diverse group of people that it attracts, something that Lydia emphasized as important. This diversity brought a variety of opinions and worldviews and made the space more open as a result. This particular point is one that should be considered when discussing and planning safe spaces. If particular places promote a certain degree of diversity, this may attract a more diverse group of people and lead to greater openness and acceptance.

5.4.2 Queering the Community

In addition to creating visible, welcoming spaces for queer individuals, most safe space programs also attempt to increase the visibility of queer allies by allowing those allies to advertise their support of the community ("Resources for Safe Zone Programs," 2008). The reasoning behind this is that increasing the visibility of allies will, in turn, increase the amount of support that queer students feel within the community. The more supported they feel, the more willing they will be to discuss queer issues or express themselves, which will make them feel safer overall. However, the majority of safe space programs, including the Positive Space Program at the U of S, limit this push for increased visibility of allies to the campus community. While there are some safe space programs that target off-campus locations and the broader community, these non-campus based programs are relatively rare by comparison. While making campus environments safe and welcoming for queer students is important, this focus on the campus community tends to overlook the importance of the broader community and the role that it plays in the lives of queer students. Queer students, as with any students, may spend large portions of their time on campus, but this time spent on campus is not the entirety of their lives. A welcoming environment on campus is a necessary part of creating a positive student experience, and it can provide a respite from less welcoming spaces off-campus, but it does not negate student experiences in the outside world. It would make sense, then, to attempt to make communities more welcoming as a whole. One way to achieve this may be to "queer" the community and increase the visibility of queer allies and support outside of campus.

Participant photographs of several advertised ally spaces within the community support the idea that ally visibility can provide an increased sense of safety. Being an advertised Positive Space was not a requirement of safe spaces for this project, but in certain cases, this type of

visible support of the queer community could add to the perceived safety of a specific place. This was especially true for spaces located off-campus. The campus, in general, was viewed as a safe area, and participants felt relatively comfortable there. Visibility of allies was something that was much less common off-campus, so visible markers of support of the queer community were more of a novelty when they involved places not affiliated with the university.

Danny, in particular, seemed to emphasize the importance of off-campus locations that advertised themselves as ally spaces or otherwise showed support of the queer community. When explaining his reasoning for photographing the Grosvenor Park United Church, he indicated the rainbow sticker displayed in the church's front entrance. He elaborated, saying, "You know, even though I'm not religious, it's so, I mean, they still make it clear that they make an effort to reach out to the queer community. And that's what makes it a safe space." He and Scott also both photographed Turning the Tide Bookstore, one of the few off-campus businesses that openly advertised being a safe space. The fact that it was not a space that was coded specifically as queer, but it still made its support of the queer community known was part of the reasoning that both Scott and Danny gave for photographing it. This type of advertised support of the queer community normalized queerness within that space. Queer individuals were not marked as "other," but instead were included among community members that were expected to make use of this space. Having these types of general public spaces that embrace queerness is important, as they promote the idea that queer individuals are merely part of the broader community.

The emphasis on places that were not specifically queer reflects participants' desire to not be viewed as only, or even primarily, queer. As Oswin (2008) discusses in her article *Critical Geographies and Uses of Sexuality: Deconstructing Queer Space*, "Sexual identity politics is

frequently about recognizing and accepting the 'other'. It is about extending the norm, not transgressing or challenging it" (p. 92). This can, perhaps, explain part of the issue that participants had with queer spaces. By emphasizing queerness as the most important aspect or type of identity, these spaces marked queerness as something that was non-normative and in a sense, labelled queer individuals as "other." This type of mindset does not question heteronormativity and can even serve to uphold and perpetuate ideas around what qualifies as "normal," both within the queer community and society as a whole (Oswin, 2008). This, along with factors such as group dynamics and feelings about the people who regularly made use of a space, led to a type of unintentional exclusion within some queer spaces. Those who study safe spaces and plan and promote safe space programs should take this into account and promote an atmosphere of inclusion within safe spaces that focuses on more than just sexuality and gender identity.

5.4.3 Questioning the Assumption of Default Heterosexuality

While it is important to increase the visibility of allies and support for the queer community outside of campuses, it is also vital that the assumption made by many researchers that space is by default "heterosexual" be called into question. Researchers such as Oswin (2008) have already started to question this assumption, pointing out that this kind of assumption is heteronormative in and of itself. Browne (2007a) elaborated on this idea in her discussion of the need for queer rather than gay and lesbian geographies, saying that there is a need for research that transgresses societal boundaries such as heterosexual and homosexual and stops treating queerness as something that is "other." These are ideas that both queer health and safe space research could benefit from incorporating into their work. This type of research could help to de-mystify queerness and provide a more complete picture of the relationship between sexuality and gender identity and other types of identity. Further, efforts should be made within safe space programs to approach space in a way that does not view it as heterosexual by default. This shift in focus may mitigate some of the issues that participants had with specifically "queer" spaces and remove some of the stigma surrounding queerness.

Queerness was not a requirement for safe spaces for the majority of participants, and many participants even had a preference for places that were not specifically labelled as queer. The places that they chose to focus on instead were typically more "everyday" spaces in the community, including places that participants used regularly or that were important in their daily lives. Many of these places were, in essence, normalizing. They were sites of everyday activity, where participants were allowed to be individuals who happened to be queer, rather than queer individuals. As Oswin (2008) pointed out, "Many gays and lesbians want nothing more than to be considered normal so that they might go on with their day-to-day lives as part of the status

quo." This sense of being "normal" and "part of the status-quo" was something that participants emphasized when speaking of many of these places.

Places like the Galaxy Cinema, student department and club spaces, McNally Robinson, and the Farmer's Market were all described as places where it did not matter if someone were queer. These were all places where participants carried out the "normal" parts of their lives, such as work, school, shopping, and hobbies. Despite being public spaces and, according to certain lines of thinking, "heterosexual" by default, participants spoke of many of these places as being neutral. Campus, as a safe area, was often described as neutral. Danny felt that classrooms were generally neutral spaces, making them easier to navigate. Lydia, likewise, felt this way about her department's student space, saying, "Its strength is being very neutral of who you are. You can go hang out and it's neutral." This neutrality meant not being judged solely based upon one's sexuality, but based upon a variety of aspects of one's identity, such as personality, hobbies, or academic interests.

5.5 Safe Spaces and Health

As previous geographical and health research has shown, there is a relationship between use of space, and in particular safe spaces, and health. The discussion with participants in this study and the emphasis that many placed upon the feel or "vibe" of a place, their personal level of comfort, and their memories and emotional associations with a place indicates that emotional and social aspects of health and well-being deserve more focus within the research than they currently receive. This is not to say that research regarding the effects of space on physical health is not important. Rather, other elements of health and well-being should be afforded similar attention, particularly where queer individuals are concerned.

The people who frequent a place are vital in determining whether or not that particular place is safe or unsafe. The participants in this study described places that they considered safe as having a "good vibe" or feeling "welcoming." While many of these places may not have been directly tied to health or what many would consider to be "healthy" living, the majority did focus on socialization and provided participants with a sense of community. Several of the places photographed, such as Browser's, Galaxy Theatre, McNally Robinson, and many of the places within the Broadway district, were devoted to entertainment, relaxation, and socialization. Many of these places were also what might be considered "family friendly" or gathering places for friends, and seemed to encourage a sense of belonging and group identity. This emphasis on community and belonging may indicate that their use is tied into not only emotional well-being, but also to certain aspects of social and mental health.

5.5.1 Space and Emotional Well-Being

As sites of lived experience, spaces can have a profound impact on our daily lives and overall well-being. One aspect of this is the impact that certain places can have on our emotional well-being. This is something that has not gone unnoticed in the research world, as there is a wealth of research regarding therapeutic landscapes and the ways in which different landscapes can be changed to influence mood in a positive way (Gesler, 2005; Williams, 1999; Wilson, 2003). Therapeutic landscapes are places that are tied to the promotion of health and well-being, either directly through health care delivery or indirectly through the provision of a place where individuals go to relax, heal, and feel well (Williams, 1999). Studies into therapeutic landscapes explore the ways in which they influence health. The goal of much of the work in this area is to explore places that promote overall health and to make health care sites into places that are "associate[d] with peace, relaxation, rejuvenation...restoration" (Williams, 1999, p.1). These are all qualities that are generally associated with places that are designed with these purposes in mind, such as spas and vacation spots, but I would argue that these are qualities that are inherent in many personal spaces as well, and in particular those with which individuals have some sort of emotional connection. These include family homes, important spots from childhood, and other sites associated with nostalgia and important memories. In other words, many of the types of places that participants in this study considered safe.

A personal connection is an important element of many safe spaces. Participants preferred places that made them feel comfortable. They used words like "comfy," "cozy," and "fun" to describe these places. This emphasis on comfort and positive feelings demonstrated the influence that these places have over participants' moods and emotions, an influence which, in turn, affects their emotional well-being. According to participants, safe spaces could be the

source of positive emotions. Places such as the Galaxy Cineplex, Diva's, 302, Starbucks, and Browser's provided a place for participants to relax and have fun. These places allow participants to strike a balance between work and "play," a balance that is essential to not only emotional health, but overall well-being. Research has shown that balancing one's work and social life leads not only to increased happiness, but to increased success in the work environment (Diener, Lyubomirsky, & King, 2005). Increased happiness and positive emotions can, thus, have an impact on an individual's life as a whole. This applies to both paid and unpaid types of work, and can thus be applied to non-paid student work, such as attending class and studying.

Safe spaces are meant to provide places with a positive atmosphere that are relatively free of judgment, both qualities that were important to participants in their own negotiation and labelling of space. A positive atmosphere and freedom from judgment were important qualities for safe spaces. Many places that did not appear to be free of judgment, such as the USSU Pride Centre, felt less welcoming to participants. Within many of these places, participants felt as though they were valued as a person and not as a label. They were able to open up and "be themselves," with little fear of censure. In Isaac's case, this meant being able to discuss queer issues with co-workers and feeling comfortable being himself around the other members of his student group. In Derek's case, he felt this type of freedom in places such as the Broadway District, where he felt he could discuss queer relationships and other issues without the risk of someone "beating [him] up." For Lydia, this freedom meant being able to shop at the Farmer's Market and having no one seem to care about her sexuality. This openness and freedom lead to many positive experiences within these places, and they functioned not only as safe spaces, but also as sites of emotional support.

5.5.2 Sense of Belonging, Community, and Social and Mental Health

Safe spaces can also affect social and mental health. Social relationships are an important component of health and well-being, and the impact of social relationships on individual and community health have been studied by a number of researchers and used to develop models of health for health promotion purposes (DePoy & Gitlin, 2005; Heaney & Israel, 2002; Janz, Champion, & Strecher, 2002; Wenzel, Glanz, & Lerman, 2002). Social networks, or the relationships that individuals form with other individuals and groups of individuals, can have both a positive and a negative influence on individual well-being. While social networks do not always provide direct support to the individual and can even increase the amount of stress in an individual's life if they involve toxic relationships, strong social networks including friends, family members, partners, and others who are willing to provide support in times of need can act as a buffer for stress. This type of buffer has been shown to lessen the impact of stressful situations, which, in turn, lessens the negative effects of this type of stress on individual health and well-being (Cohen & Wills, 1985). Social networks provide this type of buffer in the form of several different types of support, all of which can affect an individual's overall health and well-being. These types of support include emotional support (as discussed in the previous section); instrumental support, which provides tangible forms of aid and support to those in need; informational support, which includes "advice, suggestions and information that a person can use to address problems"; and, finally, approval support, which involves words, constructive feedback, and affirmations that individuals can use for self-evaluation (Heaney & Israel, 2002, p. 186). Spaces provide individuals with sites in which they can interact with others, and thus build and strengthen relationships and social networks. Human presence and interaction are important qualities of places, and one that often defines them. Safe spaces are no different, and based on

the data from this study, the quality of human presence and interaction within a particular place can transform that place into a safe space. Safe spaces provide support through the social networks that they help individuals form and maintain. In their discussion of safe spaces, most participants focused on emotional support, informational support, and approval support.

The majority of informational support provided by safe spaces is generally not provided by the physical space itself, but by the people who occupy and frequent the space. More specifically, the other people that individuals interact with within a given place can provide this type of support. For the participants, these people generally took the form of friends, family members, co-workers, and fellow students. These individuals provided informational support through conversation and interaction, and in many cases offered advice. The Internet is one example of a safe space that provided this type of informational support. Both Scott and Derek mentioned the Internet as an important source of their interactions with other queer individuals. Many of these interactions were related to an increased understanding of queerness. In Scott's case, two of his gay male friends on the Internet were the first to provide him with information about relationships and sex, something that he did not feel he could obtain elsewhere, given that he was still young, not yet out, and didn't know any other queer individuals at that time. Derek, likewise, said that he used the Internet as a means of connecting with other queer individuals and keeping up-to-date on the queer community at the U of S and within Saskatoon. The Internet and the people that they knew there were also sources of information for both men, providing them with information and connections that they would not have been able to access elsewhere.

The approval support that safe spaces provided for many participants was related to the positive relationships that participants made and maintained within these spaces. The fact that individuals focused on places that affirmed their identity as individuals and did not focus solely

on sexual and gender identity reflects this. Locations such as the Broadway District, the Galaxy Theatre, and the U of S campus provided participants with places where they felt accepted without having to worry that this acceptance was conditional on their queerness. Being valued as an individual promoted a positive self-image and made them feel better about themselves overall.

One important thing to remember when considering safe spaces, social networks, and social health is that social networks and relationships do not only exist solely within the boundaries of safe spaces. While acquaintances and friendships may be maintained primarily within certain safe spaces and occasionally are limited to those spaces, as in the case of certain work and school environments, they often extend into other areas and parts of individuals' lives. A good example of this would be the friendships that Isaac had with many of his co-workers and fellow students. Many of the relationships that he considered important were formed on the university campus, but then extended into other parts of the community and his life. Many of the friends that he spoke of spending time with were people that he met in class, volunteered with on campus, or met through his department's student group. The time that they spent together and their interactions were not limited to campus, however. Once those friendships grew, they essentially moved beyond the boundaries of the campus or Isaac's workplace and expanded to include other parts of the broader community. Another example of this would be the friendships that Scott made through the Internet. Many of these relationships were not limited to online interactions and greatly influenced his life outside the Internet. His first gay friends were people that he met through the Internet, and most of his current queer friends were also people that he had met online. This included his best friend, Dylan, with whom he spent the majority of his free time.

These types of relationships are important because they provide individuals with positive social support and a sense of connectedness. In the case of queer individuals, this could be especially vital, given the rates of suicide and depression and other forms of mental illness found within the community, and especially among its younger members. Positive social support can mitigate some of the effects of homophobia and societal pressure to conform to heteronormative ideals. It can also lessen the effects of discrimination that queer individuals face for other parts of their identity, such as race and gender. In addition to providing places where individuals feel safe and accepted and are free to express themselves, safe spaces can positively influence overall well-being by helping to build and form positive social networks and relationships.

6.0 Conclusion

In conclusion, this project has proved enlightening, both on a personal and an academic level. From a personal perspective, this research has given me additional insight into the queer community both at the University of Saskatchewan and throughout Saskatoon. As a non-native of the city, the province, and even the country, it has been interesting to see the experiences of queer students raised on the Prairies as a whole and Saskatchewan specifically. Despite the differences in geography, there are some striking similarities between the experiences of some study participants. This is especially true for those participants raised in small towns and rural areas. It was also interesting to "see" Saskatoon through the eyes of fellow queer students. There were certain places and areas within the city that I expected to see as part of the Photovoice, such as the Broadway area, 302, and Diva's. There were other locations that were a bit of a surprise, however, like the Saskatoon Farmer's Market. The inclusion of spaces such as these helped to open my eyes to some of the potential safe spaces within Saskatoon that I had yet to even consider, let alone utilize.

On an academic level, this project allowed me to explore ideas surrounding space and queerness and the relationship between the two. It is my hope that this exploration provides insight that can be used to inspire future research in these areas and is useful in future safe space efforts, on the U of S campus, within Saskatoon, and elsewhere. Participants noted that they would like to see this research lead to better availability of information regarding sexuality and gender identity, while also providing a list of potential safe spaces within Saskatoon. While I did not accomplish the first of these, the list of safe spaces, areas, and types of safe spaces listed within the body of this thesis is at least a first step in achieving the second.

This project also allowed me to further explore some of the terminology and labels surrounding sexuality and gender identity. In particular, I was able to explore the history of the word "queer" and its various meanings and implications. As a queer individual, I had personal knowledge of the term before beginning this research, but it was interesting to approach it from a purely academic standpoint. One of the biggest challenges of this research was finding the appropriate terminology to use. I wanted to find a term that would be inclusive, but still reflected individual identity. I chose "queer" because it is an inclusive term and also has a rich history related to politics, academics, and advocacy. While I still believe that this term was the best choice for this research, I would be curious to see what differences would arise if this project was repeated using an alternate term, such as LGBTQ. Use of a different term might lead to a group of participants with different views on identity. Queer is still a contested term even among sexual and gender minorities. It is interesting that participants in this study did not see themselves as "political," but they were willing to identify with a term that has certain political connotations. However, while participants readily identified themselves as queer when signing up for the study, and it was the term that they often used to discuss queer individuals in a general sense, when they spoke about themselves or other individuals, they tended to use more specific labels, such as "gay," "bisexual," and even "ambisexual." It would be interesting to see research that explored these different types of labelling and uses of the word queer.

6.1 Study Limitations

This study was not without its limitations. There were several aspects of the research that had to be adjusted to account for various issues. These problems were discussed with my research supervisor as they arose and, based on advice from my supervisor, other committee members, and the local ethics board, the project was adjusted accordingly. Before getting into a more in-depth discussion of these, it is important to note that many of the study elements that I address as limitations can also be considered strengths. The issues I discuss regarding study participants, in particular, are a good example of this. While the make-up of the participant group did have its limitations, individual participants also brought their own experience and enthusiasm into the project, which strengthened the study as a whole. It is also important to keep in mind that the term limitation merely denotes areas of the study that are situated within a specific context, and that these areas can and should be expanded upon and explored in future research.

As mentioned above, several of the limitations of this study were related to the make-up of the participant group. Many of these limitations were due to issues with recruitment. As noted in the methodology section of this thesis, original plans for recruiting participants primarily through the USSU Pride Centre were not successful and most participants were recruited through the use of online advertisements on the university website, advertisements posted throughout campus, and use of snowball sampling. This resulted in recruitment taking a longer span of time than initially expected, which led to some adjustments to the timeline and group orientation sessions. The recruitment process may have also contributed to the somewhat homogenous make-up of the participant group, all of whom identified as white, able-bodied and were from Western Canada. Participants also all identified as either gay, queer, or bisexual, with

no representation of lesbian, pansexual, asexual, or transgender individuals. This lack of representation of other ethnicities and origins does, in part, contribute to the lack of diversity found within queer studies. However, this lack of diversity may also be reflective of the demographics of the queer community within Saskatoon. Given the lack of data available on the Saskatoon queer community, it is difficult to know its demographics and compare them with this study's participants. It would be ideal if future research attempted to fill some of these gaps in knowledge on the queer community within Saskatoon and also tried to include portions of the community that were not among the participants in this research.

Another aspect that others might consider expanding upon in future research is the age of participants. Participants in this study were all upper year students and were generally in their early to mid-20s. This particular age range was a strength for this project, as it spanned a rather broad age range and allowed for a variety of different perspectives. As several participants mentioned in group discussions and their interviews, they did not feel comfortable expressing or speaking about their sexuality during their first few years at the University. The fact that the participants in this research were older meant that they felt more comfortable discussing their sexuality and gender identity and opening up about their experiences. It would be helpful if future research delved further into this issue, both by targeting younger students and by further exploring whether this increased openness is common to older students in general, or particular to participants in this study.

While not necessarily a limitation, it is also important to keep in mind that participants in this research were all "out." This was beneficial to this research project, but future research may also want to consider working with queer students that are not out, as their negotiation and use of safe spaces and their experiences as queer students may be somewhat different.

The last limitation of the study was the inability to explore unsafe as well as safe spaces within the course of this project. While unsafe spaces were touched upon in the interview portion of the research, being able to explore this further within the Photovoice portion of the study and see representations of safe spaces provided by participants would have been useful. Originally, it was my intention to have participants photograph both safe and unsafe spaces, but due to ethical concerns, this was changed. It would be useful to explore this further in future research, if it could be done in a safe, ethical manner.

6.2 Future Research

This study has many implications for future research in the areas of queer student health, queer identity, and safe spaces. There is a distinct lack of research into safe spaces that uses health as a lens, whether in the university environment or otherwise. There is, as this research has shown, a need to further explore these themes. There is also a need for further research into both safe spaces and queer health in the context of the university setting, as the current literature is lacking and this particular demographic has been overlooked in past research. University is a time when many queer young adults first feel comfortable exploring or expressing their sexualities or gender identities. As such, this is a demographic that researchers should be working with in order to build a better image of queer identity, health, and use of space.

Another indication of this research is the need for studies into queer identity, health, and place that focus specifically on "everyday" spaces. Past research has focused primarily on places that are either coded as "queer" or are notable because of their relationships to political and/or sexual aspects of queer identity. While work with these types of spaces is important, the scope of this research should be expanded to include all facets of queer life and identity. The focus that many participants placed on "everyday" spaces in their lives indicates that these types of spaces play an important part in their lives as queer individuals. Exploration of how the lives and health of queer individuals are influenced by spaces not specifically coded as "queer," and how these spaces are related to safety, can provide a more complete picture of queer health and use of space. Shifting the focus of studies to include places not typically associated with the queer community will also enable researchers to target individuals that have been absent from studies of specifically queer spaces. These individuals may feel excluded from specifically queer spaces, so

focusing on other, "non-queer" spaces may lead to them being more willing to participate in the research.

The last implication for future research is that there is a need for further work into queer health that uses a holistic approach to health and does not focus primarily on sexual and/or physical health. As discussed previously, the emphasis in the majority of research on sexual behaviour and health, while important, has created a highly skewed, incomplete picture of queer health. Discussion of sexual activity was not absent from this research and it was an important component of the discussion, but the fact that participants generally seemed to focus on other aspects of their lives and identities indicates that there is much more to queer identity and sexuality than just sex. Exploration of these ideas and their implications for both queer health and identity may yield some interesting results and help to expand current ideas around what composes queer identity.

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APPENDIX A: INDIVIDUAL GENERAL CONSENT FORM

You are invited to participate in a study:

“Finding a Voice: Place and Queer Student Health at the University of Saskatchewan”

This study is part of a Master’s Thesis project for the Department of Community Health & Epidemiology in the College of Medicine.

Please read this form carefully, and feel free to ask questions you might have.

Researcher Information

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Purpose and Procedure

What is the purpose of this study?

This study aims to understand how self-identified Queer students at the University of Saskatchewan enact health through the negotiation of space, and in particular safe spaces, in their daily lives.

Why Queer student health?

There is currently a notable lack in the research regarding Queer health and, in particular, the health of Queer youth and young people. Of the research that has been done, a majority focuses only on sexual health or sexual activity. Since there are many facets to health—spiritual, environmental, mental, physical—it is important that more research be done in this area to help increase the available body of knowledge and to potentially assist health care providers, Queer activists, and planners and policymakers in the future.

How will this research be conducted?

The study will take place over the course of roughly 8 weeks on the University of Saskatchewan campus. Data will be collected using methods that include interviews, group discussions, and photography. The findings of this study will then be presented in the form of a Master's Thesis on this topic.

How much of my time will this research take?

This research, will be completed over an 8-week period, however each activity will not require a large time commitment of each participant. Estimates for participant time in each stage of the project are as follows:

- Project Orientation/Discussion Session: approximately 2 hours
- Photography: Participants will be provided with a disposable camera and have approximately 2 weeks to take 10 photographs
- Individual Interview: approximately 2 hours
- Concluding discussion group: approximately 2-3 hours

Potential Benefits

What are the potential benefits of this research?

This research has several possible direct and indirect benefits including:

- \$50 honorarium to be paid upon completion of the study;
- Pizza and beverages provided at orientation and closing group sessions;
- Participants may receive a copy of all the photographs you have taken as a part of this project;
- Participants will be contributing to generating a written and visual record of the experiences of self-identified Queer first year students at the U of S; and
- Results may inform USSU Pride Centre initiatives aimed at making information available regarding potential “safe” and “unsafe” spaces for students at the U of S and possibly enabling conversation around ways to improve upon “unsafe” spaces.

It is important to note that these benefits are only hopeful and anticipated outcomes, and that some of these may not be achieved.

Potential Risks

Are there any risks?

The main risk in this study involves the possibility of negative feelings brought up through the discussion of unsafe spaces (and the negative experiences that may be associated with these spaces). However, the researcher in this study will take precautions to reduce this risk.

Since the discussion of unsafe spaces might illicit some negative feelings, participants will be provided with a list of on and off campus supports. Participants are also free throughout the course of the project to answer/not answer or discuss/not discuss questions and topics as they

wish. If a participant feels too uncomfortable to answer a particular question or discuss a specific topic, they are not required to do so.

What if I'm worried about people finding out I'm participating in a study about Queer issues?

Participant identities will be kept completely confidential and anonymity will be maintained to the best of the researcher's abilities. At no time will your name, identity or personal information be revealed to anyone outside of the research group (i.e. study participants and the researcher). However, if you are worried about others finding out about this participation in the study, you may withdraw from the study at any time. **We also ask that if participants do not feel comfortable discussing their sexuality or gender identity or are significantly concerned that others will find out that they do not participate in this study.**

Storage of Data

Where will information from the study be kept?

All data with identifying information (i.e. interview recordings, consent forms, contact information) will be stored in a secured location, including a locked filing cabinet to which only the researcher has access and (for electronic data) a password protected computer. Other data (i.e. photographs, interview transcripts) will be de-identified and will also be stored in these secured locations. These data will be kept for a period of 5 years, after which time they will be destroyed.

Confidentiality & Anonymity

Will my information/identity be safe?

Full measures will be taken within this study to ensure that all participants' identities and information are kept fully confidential. All possibly identifying information will be removed before information and answers provided by participants is incorporated into text. This includes interview transcriptions, copies of which will be given to individual participants for review before they are analyzed, to ensure that all information conveyed within is accurate and that all potentially identifying information is removed. Additionally, all participants will be referred to by pseudonyms that are only known to the researcher within this text.

Limits on anonymity include people who see each other in discussion groups. However, all participants will sign confidentiality forms at these meetings and will be required to keep the identities of other study participants confidential.

Will other participants know who I am?

Since this research will involve a group orientation/focus group and a final group session, participants will be aware of others participating in this project. However, all participants will be asked to not disclose the identity of or discuss other participants in this research to anyone outside of the research group (i.e. participants, the student research & the research supervisor).

Right to Withdraw

What if I need to withdraw from the study?

Participation in this study is voluntary, and participants are free to answer only those questions they are comfortable with. The information that is shared will be held in strict confidence and seen only with the researcher and her thesis committee. The thesis committee will not know the names of individual participants. You may withdraw from the research project for any reason, until 8 weeks after the concluding discussion group, at which point all links between your name and your individual contributions to the study will be destroyed. The right to withdrawal comes without penalty of any sort and the decision to withdraw will not affect your ability to access services at the USSU Pride Centre or your course of study at the University of Saskatchewan. If you withdraw from the research project within the time frame during which it is still possible to identify your contributions any data that you have contributed will be destroyed.

Questions

If you have any questions concerning the research project, please feel free to ask at any point; you are also free to contact the researcher, Danielle Sturgeon or her research supervisor, Dr. Sylvia Abonyi, at the contact information listed on the first page. This research project has been approved on ethical grounds by the University of Saskatchewan Behavioural Research Ethics Board on March 30, 2010 (BEH #10-44). Any questions regarding your rights as a participant may be addressed to that committee through the Ethics Office (966-2084). Out of town participants may call collect.

Follow-Up or Debriefing

Results of this study will be available in the form of a Master's thesis. Copies of this thesis and any related articles or publications will be made available upon request to the researcher.

Consent to Participate

I have read and understood the description provided; I have had an opportunity to ask questions and my/our questions have been answered. I consent to participate in the four activities related to this research project, understanding that I may withdraw my consent at any time. I understand that I will have the opportunity to reconsider my consent at each stage of the project, including the orientation/group discussion, the photography, the individual interview, and the concluding group discussion. A copy of this Consent Form has been given to me for my records.

(Name of Participant)

(Date)

(Signature of Participant)

(Signature of Researcher)

APPENDIX B: ORIENTATION MEETING & FOCUS GROUP, INDIVIDUAL INTERVIEW & CONCLUDING DISCUSSION CONSENT FORM

“Finding a Voice: Place and Queer Student Health at the University of Saskatchewan”

This study is part of a Master’s Thesis project for the Department of Community Health & Epidemiology in the College of Medicine.

Please read this form carefully, and feel free to ask questions you might have.

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Overview: This study aims to understand how self-identified Queer first year students at the University of Saskatchewan enact health through the negotiation of space, and in particular safe spaces, in their daily lives. The study will take place over the course of roughly 8 weeks and will use methods that include an orientation meeting, individual interview, a Photovoice component and a concluding discussion session. **This consent form applies specifically to the orientation meeting/focus group, individual interview and concluding discussion pieces of this research, which will take place after all participants have been recruited into the study.**

Risks & Benefits There main risk in this study involves the possibility of negative feelings brought up through the discussion of unsafe spaces (and the negative experiences that may be associated with these spaces). However, the researcher in this study will take precautions to reduce this risk.

Since the discussion of unsafe spaces might illicit some negative feelings, participants will be provided with a list of on and off campus supports. Participants are also free throughout the course of the project to answer/not answer or discuss/not discuss questions and topics as they

wish. If a participant feels too uncomfortable to answer a particular question or discuss a specific topic, they are not required to do so.

This research has several possible direct and indirect benefits including:

- \$50 honorarium to be paid upon completion of the study;
- Pizza and beverages provided at orientation and closing group sessions;
- Participants may receive a copy of all the photographs you have taken as a part of this project;
- Participants will be contributing to generating a written and visual record of the experiences of self-identified Queer first year students at the U of S; and
- Results may inform USSU Pride Centre initiatives aimed at making information available regarding potential “safe” and “unsafe” spaces for students at the U of S and possibly enabling conversation around ways to improve upon “unsafe” spaces.

It is important to note that these benefits are only hopeful and anticipated outcomes, and that some of these may not be achieved.

Rights of Participation and Withdrawal: With your approval, the interview will be recorded. Please be advised that you do not have to answer any questions you are not comfortable with and that you may withdraw from the study at any time. If you withdraw from this study at any time, we will confirm with you which parts (or all) of the data that you have contributed should be destroyed.

Confidentiality & Anonymity: All data from this group session will be kept confidential and only the research team will be aware of your identity. Because the participants for this study are participating in this and another group session, participants will be aware of the identity of other participants in this research. We would ask that you not discuss other participants with or disclose their identities to anyone outside of the research group (i.e. participants, the student researcher & research supervisor). Transcripts of this session will be used to inform group interviews and later stages of the research project. Since it is a group discussion and not individual information as in the interviews, there will not be a review and release process for these transcripts. Your name will not appear in any report, presentation or publication about this study, unless you choose to be identified. **Any material with identifying information will be altered or deleted and you will be assigned a pseudonym.** The consent forms for this session will be stored separately from transcripts and photographs, so that it will not be possible to associate a name with any given information.

Data Storage: All materials pertaining to this project (photographs, tapes, digital recordings, hard copies of transcripts, electronic files on disk) will be stored in the office of either the student researcher or the research supervisor, in a locked cabinet and on password protected

computers. All transcripts and digital materials will be destroyed 5 years after the end of this project.

Dissemination: The knowledge gained from this study will be disseminated in a PowerPoint presentation of work to date during a final group meeting to take place on the University of Saskatchewan campus. With the agreement and permission of all participants, a copy of this presentation may be presented to the USSU Pride Centre. Results of the study will also be included in a Master's Thesis and possibly in articles in relevant journals.

If you have any questions about this study, please feel free to ask at any point. You are also free to contact the researchers at the numbers and e-mail addresses provided above. This project was approved by the Behavioural Research Ethics Board, University of Saskatchewan on March 30, 2010 (BEH #10-44). If you have any questions or concerns about your rights of treatment as a participant, you may contact the chair of the Research Ethics Board at 306-966-2975 or by email at ethics.office@usask.ca. Out of town participants may call collect.

Orientation Session & Focus Group:

Methods: As one of the group of students who have been invited to participate in this research project, you will be asked to attend an orientation session to further familiarize you with the study and to participate in group discussion. During this 2 hour session, the student researcher will go over the purpose of this research in further detail, will ask the group to briefly discuss ideas around safe and unsafe spaces and experiences as a Queer student at the University of Saskatchewan, and will further explain the Photovoice piece of this research. The researcher will be taking notes on any group discussion to possibly use in the individual interview stage of this research and, if applicable, this session will be tape recorded. Given the nature of the discussions, participants are reminded that they are not required to answer any questions or participate in any discussions, unless it is their wish and that they may request that the audio recorder be turned off at any point if they feel uncomfortable.

At the end of this meeting, you will be provided with a camera, Photovoice guidelines, and third party consent forms, along with instructions as to how to conduct the next phase of this research, a 2 week Photovoice project.

- 1) *I have read and understood the contents of this consent form and agree to participate in this group session:* _____ Yes _____ No

I have received a copy of the consent form for my files: _____ *Yes* _____ *No*

I agree to have this session audio taped: _____ *Yes* _____ *No*

Participant Name (print) *Participant* *Signature*

Researcher Signature *Date*

Individual Interview:

Methods: You are one of 5-10 student participants at the University of Saskatchewan who took pictures over the course of approximately 2 weeks for this study. When we last met, the student researcher collected your camera and scheduled a time for this individual interview. Today we would like to show you your developed pictures and ask you to choose 3-4 that you feel best represent safe spaces in your lives. We would also like to interview you about these 3-4 pictures. We expect the interview to last about 1½ to 2 hours. This interview will be audio recorded.

At the end of the interview, you will receive a copy of your photographs that you may keep.

- 1) *I have read and understood the contents of this consent form and agree to participate in this interview and this study:* _____ *Yes* _____ *No*

I have received a copy of the consent form for my files: _____ *Yes* _____ *No*

I agree to have my interview audio taped: _____ *Yes* _____ *No*

Participant Name (print) *Participant Signature*

Researcher Signature *Date*

- 2) *I wish to have my transcript returned to me so that I may review it for omissions and errors:*

_____ *Yes* _____ *No*

Below is the address the transcript can be mailed to. I understand that my address will only be used for this purpose:

Name:

Address:

Concluding Discussion & Work-to-date Session:

Methods: As one of the participants in this research project, you will be asked to attend a final work-in-progress session. During this session, the student researcher will present a slide show of the photographs selected by participants as part of this project and will discuss the project work to date. Participants will be allowed to comment on their experiences as part of the project and on their own photos and the photos of others. This session will take approximately 2 to 3 hours.

- 1) *I have read and understood the contents of this consent form and agree to participate in this group session and this study:* _____ *Yes* _____ *No*

I have received a copy of the consent form for my files: _____ *Yes* _____ *No*

I agree to have this session audio taped: _____ *Yes* _____ *No*

Participant Name (print)

Participant Signature

Researcher Signature

Date

APPENDIX C: CONSENT AND INFORMATION FORM—PHOTOVOICE PARTICIPATION

“Finding a Voice: Place and Queer Student Health at the University of Saskatchewan”

This study is part of a Master’s Thesis project for the Department of Community Health & Epidemiology in the College of Medicine.

Please read this form carefully, and feel free to ask questions you might have.

Primary Researchers:

Danielle Sturgeon, MSc Student
Department of Community Health & Epidemiology
College of Medicine
Phone: (306) 262-7000
Email: dks116@mail.usask.ca

Sylvia Abonyi, Research Supervisor
Department of Community Health & Epidemiology
College of Medicine
Phone: (306) 966-2194
Email: sylvia.abonyi@usask.ca

Overview: This study aims to understand how self-identified Queer first year students at the University of Saskatchewan enact health through the negotiation of space, and in particular safe spaces, in their daily lives. The study will take place over the course of roughly 8 weeks and will use methods that include an orientation meeting, individual interview, a Photovoice component and a concluding discussion session. This consent form applies specifically to the Photovoice piece of this research, which will take place following the orientation meeting, during weeks 3 to 5 of the project.

Methods: We are asking for you to take photographs for a two-week period of time. We will ask you to take a minimum of 10 pictures over the course of two weeks. These photographs should picture spaces that you feel represent safe spaces, both on and off campus, for you as a Queer student at the University of Saskatchewan. Up to 9 other first year students from the University of Saskatchewan will also be participating.

You will receive an orientation session that will introduce you to the rest of the group participating in the project, will inform you of what kinds of photographs we are looking for, and during which you will be given a disposable 35mm camera for use with this project.

We ask that you do not take photographs that include identifiable images of yourself or someone else of a sensitive, embarrassing, or illegal nature (e.g. nudity, drug use, intoxication). Please be aware that the researchers have a legal obligation to report any information that identifies individuals engaged in illegal activities, or suggestive of harm to themselves or others.

At the end of the two-week period of photography (or when you finish taking your photographs, if before the end of this period), the student researcher will meet with you to collect the camera and all of your photographs.

Shortly afterwards we will contact you to conduct an interview that will take about 1.5 to 2 hours. In that interview the student researcher will go through your photographs with you and will ask you to choose 3 to 4 of your photographs that you think best represent your ideas about safe spaces as they apply to Queer students at the University of Saskatchewan. The student researcher will also ask you some questions about what/who is in them, why you consider these spaces safe, and what changes to these spaces could potentially make them unsafe.

At the end of the interview, you will receive a copy of your photographs that you may keep.

Risks & Benefits: The main risk in this study involves the possibility of negative feelings brought up through the discussion of unsafe spaces (and the negative experiences that may be associated with these spaces). However, the researcher in this study will take precautions to reduce this risk.

Since the discussion of unsafe spaces might illicit some negative feelings, participants will be provided with a list of on and off campus supports. Participants are also free throughout the course of the project to answer/not answer or discuss/not discuss questions and topics as they wish. If a participant feels too uncomfortable to answer a particular question or discuss a specific topic, they are not required to do so.

This research has several possible direct and indirect benefits including:

- \$50 honorarium to be paid upon completion of the study;
- Pizza and beverages provided at orientation and closing group sessions;
- Participants may receive a copy of all the photographs you have taken as a part of this project;
- Participants will be contributing to generating a written and visual record of the experiences of self-identified Queer first year students at the U of S; and

- Results may inform USSU Pride Centre initiatives aimed at making information available regarding potential “safe” and “unsafe” spaces for students at the U of S and possibly enabling conversation around ways to improve upon “unsafe” spaces.

It is important to note that these benefits are only hopeful and anticipated outcomes, and that some of these may not be achieved and that some additional.

Rights of Participation and Withdrawal:

You may choose to release your photographs in two ways; 1) to be used for an interview with you, discussion, analysis, educational and/or academic purposes (complete release) OR 2) you may choose to release photographs only to the researcher and her supervisory committee to guide the interview with you and for analysis (partial release). **If you photograph another person then that person must also sign a release form. These release forms will be provided by the researcher at the start of the Photovoice portion of this study. Please be sure to indicate to the person as they are signing that they will be given the opportunity to see their picture before it is used in the study, should they wish.**

You are free to withdraw from the study at any time. If you withdraw from this study, we will confirm with you which parts (or all) of the data that you have contributed (photographs, interview data) should be destroyed.

Confidentiality & Anonymity: Unless you request otherwise, we will not link your name with any of the photographs you take. Be aware that many people in the community will see you with the camera and may know that you are participating in this study. All interview data will be kept confidential and only the research team will be aware of your identity. Because the participants for this study have been selected from a small group of people, it is possible that you may be identifiable to other people on the basis of what you have said. They may also be able to link you to your photographs and your comments about those photographs. We therefore advise you to consider this as you take your photographs and offer your responses in interviews. After the interview you will have the opportunity to review a transcript of the interview so that you may approve, change, or remove any of your responses. Your name will not appear in any report, presentation or publication about this study, unless you choose to be identified. **Any material with identifying information will be altered or deleted and you will be assigned a pseudonym.** The consent forms will be stored separately from transcripts and photographs, so that it will not be possible to associate a name with any given responses.

Data Storage: All materials pertaining to this project (photographs, digital recordings, hard copies of transcripts, electronic files on disk) will be stored in the office of either the student researcher or the research supervisor, in a locked cabinet and on password protected computers. All transcripts and digital materials will be destroyed 5 years after the end of this project.

Dissemination: The knowledge gained from this study will be disseminated in a PowerPoint presentation of work to date during a final group meeting to take place on the University of Saskatchewan campus. With the agreement and permission of all participants, a copy of this presentation may be presented to the USSU Pride Centre. Results of the study will also be included in a Master's Thesis, as well as in academic articles and presentations.

If you have any questions about this study, please feel free to ask at any point. You are also free to contact the researchers at the numbers and e-mail addresses provided above. This project was approved by the Behavioural Research Ethics Board, University of Saskatchewan on March 30, 2010 (BEH #10-44). If you have any questions or concerns about your rights of treatment as a participant, you may contact the chair of the Research Ethics Board at 306-966-2975 or by email at ethics.office@usask.ca. Out of town participants may call collect.

Consent to Participate: *I have read and understood the description provided above; I have been provided with an opportunity to ask questions and my questions have been answered satisfactorily. I consent to participate in the study described above, understanding that I may withdraw this consent at any time. A copy of this consent form has been given to me for my records.*

I have received a copy of the consent/information form for my files

Yes___ No___

(Print Name and Signature of Participant)

(Date)

(Signature of Researcher)

APPENDIX D: PHOTOVOICE THIRD PARTY PHOTOGRAPHS RELEASE

The student researcher will carefully explain the criteria for the release of photographs prior to the release of this form. Participants will be asked to provide this form to anyone who may be identified in pictures they have taken for this study.

Primary Researchers:

Danielle Sturgeon, MSc Student
Department of Community Health & Epidemiology
College of Medicine
Phone: (306) 262-7000
Email: dks116@mail.usask.ca

Sylvia Abonyi, Research Supervisor
Department of Community Health & Epidemiology
College of Medicine
Phone: (306) 966-2194
Email: sylvia.abonyi@usask.ca

Information about the Study

A student researcher at the University of Saskatchewan, in conjunction with the USSU Pride Centre and a group of student participants, is conducting a research project about Safe and Unsafe spaces for Queer students at the University of Saskatchewan. The results of this study will be used to write a master's thesis on the subject of place and Queer student health.

Participants are taking pictures to show what they feel represent safe spaces in the lives of Queer first year students at the University of Saskatchewan. In this form, we are asking your permission to use the picture that you are in as part of this study.

Information About Dissemination

The knowledge gained from this study will be disseminated in a PowerPoint presentation of work to date during a final group meeting to take place on the University of Saskatchewan campus. With the agreement and permission of all participants, a copy of this presentation may be presented to the USSU Pride Centre. Results of the study will also be included in a Master's Thesis and possibly in articles in relevant journals.

I, _____, release the photographs with me in them taken as part of the study entitled *Finding a Voice: Place and Queer Student Health at the University of Saskatchewan*.

I agree to the following release of the photographs with me in them:

_____ Complete release - For analysis, educational and/or academic purposes.

_____ Partial release to the researchers and research assistants on this project for the purposes of analysis and an interview with person who has taken the photographs with me in them.

_____ I wish to see a copy of the photograph(s) picturing me before I agree to their use

(please provide contact information in the space below *only* if you wish to see the photographs before they are released; this information will only be used by the researcher to contact you regarding these photographs and will be kept strictly confidential):

I hereby authorize the release of the photographs I am in to be used in the manner indicated above. I have received a copy of this Data Release Form for my own records.

If I have any questions or concerns I may contact the researchers at the phone numbers and e-mail addresses above.

Participant Name and Signature (or parent/guardian)

Date

Researcher

Date

APPENDIX E: PHOTOVOICE GUIDELINES

Finding a Voice: Place and Queer Student Health at the University of Saskatchewan

Welcome to the study and thank you for your participation! The following sheet is a brief outline of the Photovoice method, along with some guidelines that include some issues to keep in mind when you are taking your pictures.

Primary Researchers:

Danielle Sturgeon, MSc Student
Department of Community Health & Epidemiology
College of Medicine
Phone: (306) 262-7000
Email: dk116@mail.usask.ca

Sylvia Abonyi, Research Supervisor
Department of Community Health & Epidemiology
College of Medicine
Phone: (306) 966-2194
Email: sylvia.abonyi@usask.ca

What is Photovoice?

Photovoice is a technique for conducting research that uses Photography as a research tool and incorporates community-based action research methodology. This technique was originally developed by health researchers Carolyn Wang and Marilyn Burris in the late 1990s as a part of a health research project involving women in rural China, and it has since been used for projects throughout the world, involving a wide range of participants and research topics. The purpose of Photovoice is to allow participants to catalogue issues in their communities and to take a more active role in the research.

Are there any “rules” for Photovoice?

The guidelines given to participants vary depending on the research being done. However, there are a few general issues that should be kept in mind for all Photovoice studies, and you should keep these in mind when taking your pictures for this study.

- Always be sure to get permission when taking someone’s photograph. You should always ask for this permission *before* you take their photograph. This protects their rights and privacy and ensures that they won’t be upset that you are taking their picture without permission. You will be given copies of consent forms for this purpose—**please be sure**

to get signed consent forms for all photos you take of people where they may be recognizable.

- Some individuals may wish to see copies of the photos involving them before giving consent. If this is the case, please have the individual write down their contact information on the consent form so that the researcher may contact them once the photographs have been developed. You do not need to take contact information for individuals who do not wish to see copies of the photographs before giving consent.
- Permission is generally not necessary if you are taking a photograph of a large group of people or any other photo where individuals are not easily recognizable, or if you are taking a picture and a person happens to walk into your shot.
- Keep in mind that some people will not want to be photographed; please respect their wishes and individual reasons for this.
- Photos of someone doing something that is risky and/or incriminating do not follow the values and goals of Photovoice. We ask that you do not take photographs that include identifiable images of yourself or someone else of a sensitive, embarrassing, or illegal nature (e.g. nudity, drug use, intoxication). **Please be aware that the researchers have a legal obligation to report any information that identifies individuals engaged in illegal activities, or suggestive of harm to themselves or others.**
- **Do not do anything that is illegal or may endanger yourself or others.**
- If you have any questions, concerns or are uncertain about the process at any time, feel free to contact Danielle at the phone or email provided above.
- Remember that you are an important part of this research and try to enjoy yourself!

How many pictures should I take?

The minimum number of photos being asked for for this project is 10. However, you may take any number of additional photos that you wish, up to 27 (the number contained on the camera).

What should I take pictures of?

For this study, we are asking that you photograph spaces that are important to you and that you feel affect your life over the course of a full academic week. These include spaces on the University campus or that are otherwise a part of your daily life. These photographs should represent you and your views. In particular, keep in mind spaces that you feel are “safe”.

How long will I have to take these pictures?

Approximately 2 weeks.

Will I get to see the pictures?

Yes. The photos you take will be processed and, afterwards, an individual interview time will be arranged. During this time, you will be shown your photos and you will help the researcher to pick 3-4 that you feel best represent you and that you wish to be shared with the group and used

in the final study. Also, copies of pictures will be provided for you at this time, and you will be provided with a photo release form to sign.

What about safety?

Please use your best judgment and do not put yourself or others at risk while photographing for this project. Since we are asking you to photograph “safe” spaces, this will hopefully not be an issue. However, if you have any questions regarding safety, please feel free to contact the researcher at any time.

If you have any other questions, concerns or comments about the process or this form, please feel free to ask Danielle in person or contact her at (306) 262-7000 or dk116@mail.usask.ca.

APPENDIX F: PARTICIPANT PHOTOGRAPHS RELEASE

The researcher will carefully explain each of the options below for the release of photographs prior to the signing of this form.

Primary Researchers:

Danielle Sturgeon, MSc Student
Department of Community Health & Epidemiology
College of Medicine
Phone: (306) 262-7000
Email: dksl16@mail.usask.ca

Sylvia Abonyi, Research Supervisor
Department of Community Health & Epidemiology
College of Medicine
Phone: (306) 966-2194
Email: sylvia.abonyi@usask.ca

I, _____, have reviewed the photographs I have taken during the “study entitled *Finding a Voice: Place and Queer Student Health at the University of Saskatchewan*.”

I agree to the following release of my photographs:

_____ Complete release - For analysis, educational and/or academic purposes.

_____ Partial release to the researchers and research assistants on this project for the purposes of analysis and an interview with me.

I hereby authorize the release of the photographs to be used in the manner indicated above. I have received a copy of this Data Release Form for my own records.

If I have any questions or concerns I may contact the researchers at the phone numbers and e-mail addresses above.

Participant Name and Signature

Date

Researcher

Date

APPENDIX G: INTERVIEW TRANSCRIPT RELEASE

The research assistant will ask participants to sign this form if they indicate they would like to review the transcript. The RA will arrange for direct delivery of the transcript and participants will be asked to sign this form when the RA picks up the transcript after it is read.

Primary Researchers:

Danielle Sturgeon, MSc Student
Department of Community Health & Epidemiology
College of Medicine
Phone: (306) 262-7000
Email: dk116@mail.usask.ca

Sylvia Abonyi, Research Supervisor
Department of Community Health & Epidemiology
College of Medicine
Phone: (306) 966-2194
Email: sylvia.abonyi@usask.ca

I, _____, have been offered the opportunity to review the complete transcript of my personal interview in the the study entitled *Finding a Voice: Place and Queer Student Health at the University of Saskatchewan*.

I acknowledge that the transcript accurately reflects what I said in my personal interview with Danielle Sturgeon and I have had the opportunity to make any changes on the transcript. I hereby authorize the release of this transcript to the researchers on this project to be used in the manner described in the consent form. I have received a copy of this Data/Transcript Release Form for my own records.

If I have any questions or concerns I may contact the researchers at the phone numbers and e-mail addresses above.

Participant Name and Signature

Date

Researcher

Date

APPENDIX H: INDIVIDUAL INTERVIEW SCHEDULE

Participant ID: _____

Date of Session: _____

Provide a basic outline of the session for participant, including a brief outline of what will be discussed and the goals/aims of the session. Remind participant that they may feel free to ask questions at any time, are not obligated to answer any questions, and may choose to end the session at any time should they feel uncomfortable. Also, ask participant if there is any general goal/expectation that they have from this session.

Note: All Questions are guidelines and suggestions and may be changed/omitted at the researcher's discretion.

Warm-up (Rapport Building):

1. How do you feel about the project so far?
2. Have there been any parts of the research that you have had issues with? Are there parts that you have enjoyed?

Participant Background:

1. Where are you from?
2. What was it like growing up there as a Queer child/youth?
3. When did you first identify as Queer (or Lesbian, Gay, Transgender, etc.)?
4. Are you “out” to your family members/friends?
5. Were there many other Queer youth/young adults/adults that you were aware of where you grew up?

General Study Related Questions:

1. Why did you choose to study at the U of S?
2. When/where/how did you hear about the Pride Centre?
3. Has the Pride Centre affected your life as a student at the U of S? If so, how?
4. What is your overall impression of Queer life on campus? In Saskatoon?

After participant background and student life have been explored, the participants photographs will be laid out and discussed. Participants will be asked to discuss the overall process and to pick 3-4 photographs that are their favorite or that they feel best represent them, answer the study questions or address the study objective. As photos are selected, participants will be asked to answer questions about them according to the SHOWeD technique:

1. What do you see here? (What is this space?)
2. What is really happening? (Why do you consider this space to be “safe”?)
3. How does this relate to [your] life/the lives of Queer students on campus?
4. Why does this problem/strength (e.g. safe as opposed to unsafe space) exist? (What changes to this space would make it “unsafe”? What about this space makes it “safe” as opposed to spaces you consider “unsafe” on campus?)
5. What can we do about it?

Participants will then be asked about the spaces pictured in their photographs and their identification of them as “safe”.

Where applicable, participants will be asked to comment further on pictures and, if possible and relevant, to produce written comments on each photo.

The session will finish with any additional questions that may arise as a result of questions and/or photo selection. Participants will be reminded of the focus group and will be encouraged to contact the researcher if they have any questions in the meantime. Copies of photos taken without the intent of use for the Photovoice project will also be given to participants at this time.

APPENDIX I: ON AND OFF CAMPUS RESOURCES

△ USSU Pride Centre

Location: 42 Lower Saskatchewan Hall
Hours: Monday – Friday: 9 a.m. – 4:30 p.m.
Phone: 966-6615
Email: pride.centre@ussu.ca
Website: www.ussu.ca/pridecentre
Services:

△ The Avenue Community Centre for Sexual & Gender Diversity

Location: 201-320 21st St. W.

Hours:

						In
○ Office/Drop						
Monday	&	Tuesday	10:00am	-		5:30pm
Wednesday		1:00pm		-		9:00pm
Thursday & Friday 10:00am - 9:00pm						
○ Phone Line						
Monday	&	Tuesday	10:00am	-		5:30pm
Wednesdays		1:00pm		-		9:00pm
Thursdays	&	Fridays	-	10:00am	-	9:00pm
Saturdays 4:30 - 10:00pm						

Phone: 665 – 1224
(800) 358 – 1833 (Toll Free)

Email: info@avenuecommunitycentre.ca

Services: Peer counselling, information resources, drop-in centre, social events, sponsored groups and clubs

△ Online Transgender Forum

Website: <http://transgendercanada.com/>

Services: National board for discussion of transgender issues

△ Student Counselling Services

Location: 104 Qu'Appelle Hall Addition

Hours: Monday – Friday: 8:30 a.m. – 4:30 p.m.

Phone: 966 – 4920

Website: <http://students.usask.ca/wellness/counselling/scs/>

Services: Personal and group counselling services (free to students), self-help tools, mental health education and referral

△ **Student Health Centre**

Location: 91 Campus Drive (Inside upper Saskatchewan Hall)

Hours: Monday: 8:30 a.m. – 12:00 p.m, 1:00 – 4:30 p.m.
Tuesday, Wednesday & Thursday: 8:30 a.m. – 4:30 p.m.
Thursday: 9:30 a.m. – 4:30 p.m.

Phone: 966-5768

Services: General health services (free to students), referral

△ **Safewalk**

Location: 41 Lower Saskatchewan Hall

Hours: Sunday – Thursday: 8:30 – 11:30 p.m. (**Safewalks provided by Campus Safety at other times**)

Phone: 966 – SAFE (7233)

Email: student.crew@ussu.ca

Website: <http://www.ussu.ca/safewalk/index.shtml>

Services: Escorted walks within a 30 minute radius of Place Riel

△ **Campus Safety**

Location: 72 Campus Drive

Hours: 24 hours/day, 7 days/week

Phone: 966-5555

Email: campus.safety@usask.ca

Website: <http://www.usask.ca/campussafety/>

Services: Personal safety, escorted walks during Safewalk off-hours

△ **Department of Discrimination and Harassment Prevention Services**

Location: 105 Maintenance Road, Research Annex, Room 237

Phone: 966-4936

Email: carole.pond@usask.ca

Website: <http://www.usask.ca/dhps/>

Services: Confidential consultation and action to resolve concerns, as requested, Postive Space program, and Gender Neutral Washrooms program

APPENDIX J: RECRUITMENT FLYER

Queer Student Health & Safe Spaces Study



Be part of a study of Queer university students' experiences and use of space.

- **Are you a student at the U of S?**
- **Do you self-identify as Queer?**
- **Are you at least 18 years of age?**

If you answered **yes** to the above questions, you may be eligible to participate in this study, which will take place during January- March 2010.

The purpose of this study is to understand how self-identified Queer students (undergraduate and graduate) at the University of Saskatchewan enact health through the negotiation of space, and in particular safe spaces, in their daily lives.

You would be involved in:

- **one orientation session/group discussion (2 hours)**
- **taking 10 photographs highlighting your experiences of safe spaces as a student of the University of Saskatchewan during one week**
- **one individual interview (1.5 hours); and for those who wish**
- **one group discussion of a selection of participant photographs**

Snacks & refreshments will be provided at the group sessions.

This study is being conducted at the University of Saskatchewan as part of a Master's Thesis and has been approved by the University of Saskatchewan Behavioural Research Ethics Board.

If you are interested in participating, or for more information about this study, please contact Danielle Sturgeon at (306) 262-7000 or dks116@mail.usask.ca. Please respond by February 20th to ensure your full participation in study activities.